L16000 158 847

(Re	questor's Name)	
(Add	dress)	
- (AdA)	dress)	
(Cit	y/State/Zip/Phone	÷ #)
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2019 AUS -5 PM 6: 08

C. GOLDEN AUG 1 2 2019

COVER LETTER

Div	vision of Corporations	
SUBJECT:	SUNSHINE FLORIDA LAYOUTS, LLC	
.,000	Name of Limited Liability Company	
The enclosed	ed Articles of Amendment and fee(s) are submitted for filing.	
Please return	n all correspondence concerning this matter to the following:	
	SARA MENEZES	
	Name of Person	
	Sunshine Florida Layouts, LLC.	
	25347 CARNOUSTIE DR	
	Address	
	SORRENTO, FL 32776	
	City/State and Zip Code	
	Sunfloridalayouts @ amail. com E-mail address: (to be used for future annual report notification)	
For further in	information concerning this matter, please call:	
Sara	Menezes Name of Person at (467) 232-3188 Area Code Daytime Telephone Number	
Enclosed is a	a check for the following amount:	
■ \$25.00 F	Filing Fee Solution Status S55.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certified Copy (additional copy is enclosed)	tus &

MAILING ADDRESS:

TO:

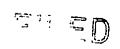
Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



SUNSHINE FLORIDA LAYOUTS, LLC

company has been notified in writing of this change.

2019 AUG -5 PH 6: C

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	y were filed on $\frac{08/24}{1}$	4/2016	and assigned
Florida document number L16000158847			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lial	bility company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the des	ignation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	_	-	· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered of		our records, enter th	te name of the ne
registered agent and/or the new registered office address her	<u>re</u> :		
Name of New Registered Agent:			
Name of New Registered Argent.			
New Registered Office Address:	Futur Florid	a street address	
	City	, Florida	20. C. J.
New Desistened Asset's Simple of the sing Designature Asset	•		zip Coae
New Registered Agent's Signature, if changing Registered Agent	_		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete			1 2

If Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
OFFIC MENEZES, RINALDO O, JR	MENEZES, RINALDO O, JR	25347 CARNOUSTIE DR SORRENTO, FL 32776	Add
			■ Remove
MENEZES. SARA	MENEZES, SARA	25347 CARNOUSTIE DR	Change
		SORRENTO, FL 32776	Add
			Remove
			Change
		Add	
		□ Remove	
		Change	
			Add
			Remove
		Change	
		□ Remove	
		Change	
			□ Remove
			Change

•	
(If an e Note:	tive date, if other than the date of filing:
he re The	cord specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of 90 th day after the record is filed.
Datec	Aug 2019.
	Signature of a member or authorized representative of a member
	SARA MENEZEŞ
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00