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(Re	equestor's Name)	
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SunGrate Real Estate Investments LLC	
Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Ali Devakhshani Name of Person	
Ali Derakhshani Name of Person Sun Crate Real Estate Investments 11C Firm/Company	
1332 Alana Dr. Apt 203 Address	
Orlando, FL 32828 City/State and Zip Code	
Sungate realestate investments @ gmail. con E-mail address: (to be used for future annual report nonlication)	η
For further information concerning this matter, please call:	
Ali Derakhshani at (832) 726-2202 70 70 Paytime Telephone Number 25 55	Ü
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS: 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

Sun Grate Real	Estate Investments	1(c
	ability Company as it now appears on our re- orida Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liabilit		and assigned
This amendment is submitted to amend the following	<u>;</u> :	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words "	Limited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>	
(Principal office address MUST BE A STREET AD	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or re		De la company de
registered agent and/or the new registered office a		The state trade of the flex
Name of New Registered Agent:		. OR P
New Registered Office Address:		5 S
	Enter Florida street ad	dress
	City	, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and 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 company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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