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10/31/2016

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Division of Corporations

**L16000198180**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : EAGLE TAX REPRESENTATION, CORP.  
Account Number : I20070000037  
Phone : (954)532-3842  
Fax Number : (954)532-3847

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: paulo@eagle-tax.com

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TALLAHASSEE, FLORIDA

**ATE/CORRECT OR M/MG RESIGN**

**SUNSHINE FINEST INNOVATION, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: SUNSHINE FINEST INNOVATION, 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:

MARLON REIS

\_\_\_\_\_  
Name of Person

EAGLE TAX REPRESENTATION, CORP

\_\_\_\_\_  
Firm/Company

5493 WILES ROAD STE 105

\_\_\_\_\_  
Address

COCONUT CREEK FL 33073

\_\_\_\_\_  
City/State and Zip Code

paulo@cagle-tax.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paulo Oliveira, EA

954

532-3842

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
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☐ \$60.00 Filing Fee,  
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(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNSHINE FINEST INNOVATION, LLC

(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 were filed on 10/27/2016 and assigned  
Florida document number L16000198180.

This amendment is submitted to amend the following:

**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:

(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 office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	MARLO REIS	219 SE 11TH ST	<input type="checkbox"/> Add
		DEERFIELD BEACH FL 33441	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MARLON REIS	219 SE 11TH ST	<input checked="" type="checkbox"/> Add
		DEERFIELD BEACH FL 33441	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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**Page 3 of 3**  
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