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Amendicul

JUN 2 2 2019 I ALBRITTON

COVER LETTER

FO: Registration Section Division of Corporations
SUBJECT: Sunstate Auto Loans, 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:
Carole A. Berk Name of Person
Sunstate Auto Loans, LLC Firm/Company
297 Porto Vecchio Way
Palm Beach Gardens, FL. 33418 City/State and Zip Code berk 12740 Caroleberk, Com E-mail address: (to be used for future annual report notification)
E-mail address; (to be used for future annual report notification) For further information concerning this matter, please call:
Carole Berk at (301) 980-88/5 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \$30.00 Filing Fee \$\times \$55.00 Filing Fee \$\times \$60.00 Filing Fee,\$\$\$ Certificate of Status \$\times \$\text{cadditional copy is enclosed}\$\$\$ 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

Loans, LLC
ny as it now appears on our records.) iability Company)
were filed on Dec. 12, 2016 and assigned lity company here:
ty Company," the designation "LLC" or the abbreviation "L.L.C."
Palm Beach Godens, F1.33418
Same as above
Florida Street address Florida 34/8 City Fig. 12 Code Fig. 12 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 ac or removed from our records: MGR = Manager AMBR = Authorized Member Type of Action **Address Title** <u>Name</u> Carole A. Berk 297 Porto Vecchio Way And Palm Beach Gadens __ Remove FL. 33418 Change MGR Stephen Siegel 294 Porto Vecchio liky WAdd Palm Beach Gardens, FL. _ Remove 334/8 ______ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change ☐ Add ☐ Remove

☐ Change

□ Add

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☐ Change

E. Effective date, if other than the date of filing:
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.
Dated <u>June</u> 4. <u>2019</u> .
Dated June 4. 2019. Caral, a Bosh Signature of a member or authorized representative of a member
Signature of a member or authorized representative of a member
Marsha A Dook
Carole, A Berk Typed or printed name of signee

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Page 3 of 3

Filing Fee: \$25.00