

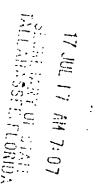
(Requestor's	s Name)
(Address)	
(Address)	
(City/State/Z	Zip/Phone #)
PICK-UP V	VAIT MAIL
(Business E	intity Name)
(Document	Number)
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JUL 18 2017 J SHIVERS

COVER LETTER

ΓO:	Registration Sec Division of Corp			
SUBJE	ECT: <u>Owzine I, L</u>	LC Name of Lim	nited Liability Company	
		valie or isin	ней главину сопрану	
The en	closed Articles of /	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
		Dominic S	cacci	
			Name of Person	
			Firm/Company	
		2423 San Pietro Circ	cle	
		Palm Beach Gard	Address ens, Fl 33410	
			City/State and Zip Code	
		dscacci@gmail	.com to be used for future annual report notif	Larian
For fur	ther information co	ncerning this matter, please co		icanin)
<u>Domin</u>	ic Scacci Name of	Person	at (<u>561</u>) 620 5848 Area Code Daytime	: Telephone Number
Enclose	ed is a check for the	e following amount:		
\$25	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

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

Qwzine I, LLC	
(Name of the Limited Liability Company as (A Florida Limited Liabil	it now appears on our records.) ity Company)
The Articles of Organization for this Limited Liability Company were document number <u>L17000014116</u>	e filed on January 18. 2017 and assigned Florida
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 C	ompany," the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
<u> </u>	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office add registered agent and/or the new registered office address here:	ress on our records, enter the name of the new
Name of New Registered Agent:	27 7
New Registered Office Address:	
	Enter Florida street address

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.

City

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

Title	Name	Address	Type of Action
MGR	Sun Hospitality Group, LLC	2423 San Pietro Circle/ Palm Beach Gardens, FL.	33410 * Add
			□ Remove
			Change
MGR	Dominic Scacci	2423 Son PIBTRO CIRCLE PAIM BEACHGAITOEN, FL	
		PAIM ISEACHGAICOER, FL	Z Remove
			Change
			□ Remove
			Change
			Add
			Remove
			Change
			Remove
			Change
			Add
			Remove
			Change

. —————			
			
		···	
			<u> </u>
			ASS
			7
n effective date is listed, the date in the late in this	the date of filing: January 18, 2 must be specific and cannot be prior to da block does not meet the applicable see Department of State's records.	e of filing or more than 90 days afte	
record specifies a delay The 90th day after the r	ved effective date, but not an ecord is filed.	effective time, at 12:01	a.m. on the earlier
ted July 11, 2017			

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Typed or printed name of signee

Filing Fee: \$25.00