117000033142

(Re	questor's Name)	
(Add	dress)	
(Adi	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	1
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400316464704

08/06/18--01005--005 ++25.00

18 AUG -6 PM 3: 37

N COOPER AUG 0 9 2018

COVER LETTER

SUBJECT: Sun State Customs LLC Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filling.	
Please return all correspondence concerning this matter to the following:	
Christopher Ash Name of Person	
SUN State Customs, LLC Firm/Company	
14.00 Jordan Ave. Sute 3	
Orlando, FL 32809 City/State and Zip Code	
e-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Christopher Ash at (407) 680-8282 Name of Person Area Code Daytime Telephone Number	
inclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \text{\$30.00 Filing Fee & Certificate of Status}\$\Bigcup \text{\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$60.00 Filing Fee, Certified Copy (additional copy is enclosed)}\$	

MAILING ADDRESS:

·TO:

Registration Section
Division of Corporations

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 State Custo (Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on ou	r records.)	
(A Florida Limi	ted Liability Company)		
The Articles of Organization for this Limited Liability Comp	•	$\frac{1}{2}$ and as	signed
Florida document number <u>L170003314</u>	Z		
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 L	inhility Company "the decignati	on "I C" "The abbreviation "I	1.0"
The new hatte mass of distinguishable and commit the words. Entitled E	maonity company, the designation	of the abbreviation 1.	<u>=</u>
Enter new principal offices address, if applicable:		<u>@</u>	<u>₹₹</u>
(Principal office address MUST BE A STREET ADDRESS	2	C	
		_ _	
		- 2	DRP CE
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	The state of the s		
		•	<u></u>
B. If amending the registered agent and/or registered	d office address on our	records, enter the name	of the new
registered agent and/or the new registered office address		<u> </u>	VI 110 110 110 110 110 110 110 110 110 11
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.	Enter Florida stree	n address	
		Florida	
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Age	ent:		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compleaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of	lete performance of my du as provided for in Chapte	ties, and I am familiar wi r 605, F.S. Or, if this doc	th and ument is
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
<u>amb</u> r	Angela Franco	1400 Jordan Avenue	Add
		Sute 3	Remove
		Orlando, FL 32809	Change
			🗀 Add
			Remove
			Change
			🗀 Add
			□ Remove
			Change
			□ Add
			□ Remove
			Change
	——————————————————————————————————————		D Add
			□ Remove
			Change
			□ Add
			_□ Remove
			☐ Change

,		
		_
	·	
	ä	
		9
		<u>`</u>
	·	_
		-
		
		
E. Effect (If an el	tive date, if other than the date of filing: (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to the date of the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)	605.020
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I nent's effective date on the Department of State's records.	
docai	acit's effective date on the Department of State's records.	
f tha ra	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea	rliar c
	e 90th day after the record is filed.	inei C
Dated	August 1 . 2018.	

Page 3 of 3

Filing Fee: \$25.00