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(Re	equestor's Name)	
- (Ad	idress)	
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PICK-UP	WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number	)
Certified Copies	_ Certificate	s of Status
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FILED
2011 APR 13 PM 1: 03
SECRETARY OF STATE
ALLAMASSEE, FLORIDA

K. SALY APR 1 7 2017

## **COVER LETTER**

Division of Co			
Sunscape Sunscape	Solutions LLC		
SUBJECT.	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Gregory Burnsed		
		Name of Person	
	Sunscape Solutions LLC		
		Firm/Company	
	6433 Wynglow Lane		
		Address	
	Orlando Fl 32818		
		City/State and Zip Code	
	sunscapesolustionsllc@gma	ail.com to be used for future annual report notifi	ination)
For further information (	concerning this matter, please c	•	reaction)
Gregory Burnsed		407 274-8982 at ( )	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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:

**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

		FILED  2017 APR 13 PM 1: 03  Ords.) ALLAHASSY OF ST.
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		APR 13 PM
d Liability Comp	any as it now appears on our rec	ords SECRETA
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		L.E.C.
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS) 6433 Wynglow Lane	<del></del>	
	Orlando FI 32818	
	SAME AS ABOVE	
	DAIVIL AD ADOVE	
<u>ROX)</u>		
		rds, enter the name of the new
ice address ner	<u>e</u> :	
Gregory Burns	ed	
6433 Wynglow	Lane	
O+33 Wyligion		iress
	d Liability Company A Florida Limited ability Company wing: the limited liability ble: **ADDRESS**  **COX**  **Tregistered of ice address her  Gregory Burns	the limited liability company here:  rds "Limited Liability Company," the designation "Lobe:  Gregory Burnsed  6433 Wynglow Lane  Orlando FI 32818  SAME AS ABOVE

## 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

Orlando

f Changing Registered Agent, Signature of New Registered Agent

Florida 32818

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>	Name	<u>Address</u>	Type of Action
Pres	Gregory Burnsed	6433 Wynglow Lane	
		Orlando FL 32818	☐ Remove
		· · · · · · · · · · · · · · · · · · ·	☐ Change
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that I Gregory Burnser	d is owner and authorised agent on LLC. Thanks!
<del>- 1</del>	
fective date, if other th	an the date of filing: 3/28/2017 (optional)
ote: If the date inserted in	late must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 this block does not meet the applicable statutory filing requirements, this date will not be listed an the Department of State's records.
record specifies a de The 90th day after th	elayed effective date, but not an effective time, at 12:01 a.m. on the earlier on the record is filed.
March, 28th	2017
	Signature of a member or authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00