## L17000114461

(Requestor's Name)
(requestors rearrie)
(A.L.)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
· ,
(Document Number)
(Eccument turnset)
Contilled Control
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200315693362

07/16/18--01008--015 \*\*25.00

SECRETARY OF STATIONS
DIVISION OF CORPORATIONS
18 IIII 16 PM 12: 55

N GOOTE JUL 2 3 2018

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Sun Tit	Name of Limited Liability Company
The enclosed Articles of Amendmen	t and fee(s) are submitted for filing.
Please return all correspondence con	cerning this matter to the following:
	JANET TRENZADO Name of Person
	Sun Title & ESCROW LLC Firm/Company
	536 Hibiscus Place Address
	Orlando FL 32807 City/State and Zip Code
	Junet@ Golden Key +9+1e Services, com E-mail address: (to be used for future annual report notification)
For further information concerning the	
Janet Tre	OZACO at (407) 879-0179  Area Code Daytime Telephone Number
Enclosed is a check for the following	; amount:
	0 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, ifficate of Status Certified Copy Certificate of Status &
MAILING ADDR Registration Section Division of Corpor P.O. Box 6327 Tallahassee, FL 32	Registration Section Tations Division of Corporations Clifton Building

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	e & ESCROW LLC	
	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on $\frac{5/23/17}{1.4401}$ and	l assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
	le entep	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the abbreviation	anu.c.
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	<del></del>
	<del> </del>	5 P
Parameter and the state of the black of		2 38 S
Enter new mailing address, if applicable:	<del> </del>	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office addresses	tered office address on our records, enter the na	me of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
<del></del>	City Zip C	ode

## 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 **Title** Address **Type of Action** <u>Name</u> TRENZADO Janet 11495 Lake Underhill Rdo Add Orlando, FL 32825 Kemove Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove \_□ Change \_□ Add ☐ Remove

\_\_\_\_\_ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		_
•		
,		
•		
		_
	1 ***	
		_ <u>₹</u> °
		— ISION
		SAPE
,		
,		
	o o	n ž
		<del></del>
	1 1	
(If an ef	tive date, if other than the date of filing: (optional) (optional) Tective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be	605.0207 ()
	nent's effective date on the Department of State's records.	nsied do ti
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea	arlier of:
	e 90th day after the record is filed.	
Dated	June 26. 2018	
	Signature of a member or authorized representative of a member	-
	Janet Trenzado	

Page 3 of 3

Filing Fee: \$25.00