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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration S Division of Co					
	NY INVESTMENTS LLC				
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	MILAGROS FELIZOLA	VALDES			
		Name of Person			
	DM SUNNY INVESTME	NTS LLC			
		Firm/Company			
	1621 LAKE WOOD DR	٧.			
		Address			
	LAKELAND, FL 33813				
	AUL ACDOSERIAZOLA C	City/State and Zip Code		2020 AUG 12 SECNALIANA TALLAHA	'i Proces
•	MILAGROSFELIZOLA@ E-mail address:	(to be used for future annual report notific	ration)	EAN SIN	
For further information	concerning this matter, please of			96.0	, ·u.s.
MILAGROS FELIZOI		863 509-8245		AH 6:	S
Name	of Person		Telephone Number	28 28	
Enclosed is a check for	the following amount:				
= \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	
side the E					
Mailing Addr Registration Division of P.O. Box 63 Tallahassee.	Section Corporations 27	Street Address: Registration Sect Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL 1	orations Hahassee Street, Suite 81	0	

LOOK 25 money Order Inside

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DM SUNNY INVESTMENTS LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{06/09/2017}{}$ ___ and assigned Florida document number 1,17000126301 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 Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: 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

, Florida _

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
MGR	JOSE J. OROPESA	5596 PAPAYA RD	Add
		WEST PALM BEACH, FL 33413	□Remove
			Change
			□Remove
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ecord specifies a delayed effective is filed.	date, but not an effective time, at 12:01 a.n	n, on the earlier of: (b) The 90th	day after the
AUGUST 8TH	2020		
	ignature of a member or authorized representati		

Filing Fee: \$25.00