1700142274

(Req	uestor's Name)
(Addi	ress)
(Addi	ress)
(City/	/State/Zip/Phone #)
PICK-UP	MAIL MAIL
(Busi	iness Entity Name)
(Doc	ument Number)
ed Copies	Certificates of Status
-cial Instructions to Fi	iling Officer:





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2023 FEB 22 AM II: 36 RECEIVED

مراح سال

CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

		ACCOUNT 1	: . OV	I20000001	.95	
		REFERE	NCE :	514898	8381435	
		AUTHORIZAT	ION :	Spelle	enan	
		COST LI	MIT :	\$ 25.00		
ORDER	DATE :	February 21, 2	2023			-
ORDER	TIME :	9:14 AM				
ORDER	NO. :	514898-010				
CUSTO	MER NO:	8381435				
	NAME :	<u>DOMESTIC</u> SUNSET LOOF		MENT FILING	į	
	EFFECTI	VE DATE:				
<u> </u>		S OF AMENDMENT D ARTICLES OF 1	INCORPO	RATION		
PLEASI	E RETURN	THE FOLLOWING	AS PRO	OF OF FILIN	G:	
XX	PLAIN	FIED COPY STAMPED COPY FICATE OF GOOD	STANDI	NG		

EXAMINER'S INITIALS:

CONTACT PERSON: Eyliena Baker -- EXT#

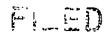
DocuSign Envelope ID: C837BCB4-37E0-4D92-9F13-37B24A2044B6 COVER LETTER

	stration Section of Corp			
SUBJECT: _		Sunset Lookout, LLC		
_		Name of Limi	ited Liability Company	
The enclosed a	Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return a	ill correspon	dence concerning this matter	to the following:	
		Dana L. Lee		
			Name of Person	
		Arnold & Porter		
			Firm/Company	
		601 Massachusetts Ave.	, NW - Room 10411	
			Address	
		Washington, DC 20001-374	1 3	
			City/State and Zip Code	
		Dana.Lee@arnoldpo	orter.com to be used for future annual report in	
Francisco Contractor			·	(Ottication)
FOR further inte	ormation co	ncerning this matter, please ca	111.	
Ryan F. B	ender		at (202) 94	2-5189
	Name of	Person	Area Code Day	time Telephone Number
Enclosed is a c	theck for the	e following amount:		
□ \$25.00 Fil	ing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

DocuSign Envelope ID: C837BCB4-37E0-4D92-9F13-37B24A2044B6 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



Sunset Lookout, LLC	2023 FEB 22 PM 12: 4			
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) Liability Company) TALLILLASSEE, FL			
The Articles of Organization for this Limited Liability Company	were filed 06/30/2017 and assigned			
on Florida document number <u>L17000142274</u> .				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	c/o Rockridge Capital Holdings			
(Principal office address MUST BE A STREET ADDRESS)	22 NE 22nd Ave., #4			
	Pompano Beach, FL 33062			
Enter new mailing address, if applicable:	Thomas W. Richardson Arnold & Porter			
(Mailing address MAY BE A POST OFFICE BOX)	601 Massachusetts Ave., NW - Room 10408			
	Washington, DC 20001			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	ddress on our records, enter the name of the new register			
New Registered Office Address:				
	Enter Florida street address			
	, Florida			
	City Zip Code			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as publication being filed to merely reflect a change in the registered office accompany has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is			

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: C837BCB4-37E0-4D92-9F13-37B24A2044B6
II amending Authorized rerson(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>	<u>Address</u>	Type of Action
MGR	Robert Kirby	c/o Rockridge Capital Holdings	ĎAdd
		22 NE 22nd Avenue #4	□Remove
		Pompano Beach, FL 33062	□ Change
MGR	James Greer	c/o Rockridge Capital Holdings	□ Add
		22 NE 22nd Avenue #4	<u>B</u> Remove
		Pompano Beach, FL 33062	Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
		·	□ Change
			□Add
			□Remove
			□Change

). If ameno	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
<u> </u>	····
	
Note: If	date, if other than the date of filing:
the record s cord is filed	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	February 21 . 2023 .
	Docustomed by:
	Signature of a member or authorized representative of a member
	SF Property Management LLC By: Robert Kirby, Manager
	Typed or printed name of signee

Filing Fee: \$25.00