

L17000173960

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

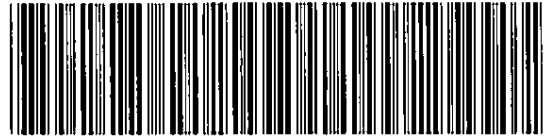
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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AUG 21 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 18, 2017

RAYMOND L SCHUMANN
RICE LAW FIRM, P.A.
222 SEABREEZE BLVD.
DAYTONA BEACH, FL 32118

SUBJECT: SUNSHINE REALTY CAPITAL, LLC
Ref. Number: L17000173960

We have received your document for SUNSHINE REALTY CAPITAL, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist III

Letter Number: 117A00016943

2017 AUG 18 P 1:33
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **SUNSHINE REALTY CAPITAL. LLC**

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Raymond L Schumann

Name of Person

Rice Law Firm, P.A.

Firm/Company

222 Seabreeze Blvd.

Address

Daytona Beach FL 32118

City/State and Zip Code

rayschumann@ricelawflorida.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Raymond Schumann

Name of Person

386

Area Code

257-1222

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

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2017 AUG 16 AM 11:41
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TALLAHASSEE, FLORIDA

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2017 AUG 18 PM 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: SUNSHINE REALTY CAPITAL, LLC

SECOND: The Florida Document number of the limited liability company is: L17000173960

THIRD: Document to be corrected is: Articles of Organization

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The filing contains an effective date of September 9, 2017.

Through typographical error, that date was erroneously entered.

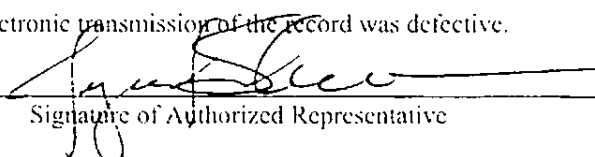
The correct effective date for the Articles is August 9, 2017.

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR

- ☐ The electronic transmission of the record was defective.

 8/15/17
Signature of Authorized Representative Date

Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

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.

Registered Agent's Signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)