Division of Corporations

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Division of Corporations

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: (850) 617-6383

From:

Account Name : JOHN M WICKER PA

Account Number : J20070000104 Phone : (239)939-2222

Fax Number : (239) 939-2280

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Enril Address: MUICKER a LOW

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUNMARK LLC

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNMARK, LLC	
(Name of the Limited Liability Compa (A Florida Limited)	my as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on 10/06/2017 and assigned
Florida document number L17000207583	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>
(Principal office address MUST BF. A STREET ADDRESS)	- FO = 4
•	05 2
	T E
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, enter the name of the nev
Name of New Registered Agent	
New Registered Office Address:	
	Enuer Florida street address
·	, Florida
<del></del>	City Zip Code
at many and a superior of the same and the s	

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

Page 1 of 3

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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	<u> </u>	Address	Type of Action
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