L18000030472

.

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
	IL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	



02/26/18--01012--025 ++30.00

18 FEB26 AM 9: 49

FEB 2 6 2018 Y SULKER

•		sistrution Section	COVER LETTER		\$	¥	L,
÷.	SUBJECT:	Sunshine Waves LLC	Name of Limited Liability Company	*		<u></u>	

1

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

I

Lee Hornbeck Name of Person Firm/Company 3356 S. Hwy 14 Address Greenville, S.C., 29615 City/State and Zip Code Lcc@BccklanLLC.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 360 6293 864 Lee Hornbeck Daytime Telephone Number Area Code Name of Person Enclosed is a check for the following amount: □ \$60.00 Filing Fee, □ \$25,00 Filing Fee 🖬 \$30,00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) . STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section **Registration Section Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunshine Waves LLC

ł

Subline waves EL	æ	
(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our recor ed Liability Company)	(<u>ds.</u>)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L18000030472</u>	my were filed on Feb. 2, 2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited 1	iability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>	
(Principal office address MUST BE A STREET ADDRESS	2	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	d office address on our recor <u>here</u> :	
Name of New Registered Agent:	·	<u> </u>
New Registered Office Address:	Enter Florida street addi	ress
	1	Florida
	, •, •	Zip Code

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 for removed from our records:

_

т

I.

MGR = Manager AMBR = Authorized Member

..

_

1

ł

1

_... _ _ _ . . _ _ _ .

<u>Title</u>	Name	Address .	Type of Action
AMBR	Jack Munsey		Add
		1221 Hillsboro Mile 41B Hillsboro	Remove
			Change
			🖸 Add
			Remove
			O Change
			🖸 Add
			Remove
			Ghange
		·	Removel
····			🖸 Add
			Remove
			Change
<u> </u>	<u> </u>		Add
			🛛 Remove
		•	Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

				<u> </u>
·				
				—
<u> </u>				
·····				—
· · · · · · · · · · · · · · · · · · ·				
			-	
		• . • •	7 <mark>81</mark>	—
	` <u></u> _	741+. 2+-1	FEB	
		א <u>י</u> גיי רויי	361	
		. بو لید 	Б Н	
tive date, if other than the date of filing:			1:9:1	<u>ر</u>
tive date, if other than the date of filing:	<u> </u>	(optional) 🤭	F .	

E. (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursaunt to 605.0207 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

,

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated	176 22 2018	
	Signalure of a member of a utilibrized representative of a member	
	Lee Hornbeck	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00