LIECCUTSOUG

(Requestor's Name)
(Address)
(Address)
(,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Endy Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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000291615190 05/21/18--01014--030 #25.00



aliahan-



May 23, 2018

DAVID HERNANDEZ 3000 N UNIVERSITY DR E CORAL SPRINGS, FL 33065

SUBJECT: SUN RAY SUNOCO LLC

Ref. Number: L18000073049

We have received your document for SUN RAY SUNOCO LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a GP, but your entity is a FL LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Dionne M Scott Regulatory Specialist II

Letter Number: 818A00010745

RECEIVED

JUNIT PHIS: 22

STATEMENT OF THE STATEMENT OF T

COVER LETTER

	Registration Sec Division of Corp			
SUBJEC	·1·	JUNI RAIL -	nited Liability Company	
		Name of Lin	nited Liability Company	
The enclo	sed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please ret	urn all correspon	dence concerning this matter	to the following:	
		<u> </u>	Name of Person	
		MAS	Firm [,] Company	
) UNIVERSITY	KE_
		Cor,	AL SPRING TO City/State and Zip Code 1 4566 @ ODL COP to be used for future annual report notif	33065
		E-mail address: (1566 @ ODL . COA	1
For further	r information con	cerning this matter, please ca		-
	Name of P	•	at (2) 2/) 346 Afea Code Daytime	
1		following amount:		
0. N.C. C		□ \$30,00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, ☐☐ Certificate of Status & Certified Copy (additional copy is enclosed)
	MAILING Registration Division of P.O. Box (f Corporations	STREET/COURIE Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 Florida document number 1800073049	and assigned
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 abb Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	- ~ D
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter t registered agent and/or the new registered office address here:	he name of the new
Name of New Registered Agent:	٦.
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 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 or removed from our records:

MGR = Manager AMBR = Authorized Member <u>Ti</u>tle Name <u>Address</u> Type of Action MUR FAWZI IBRAHIM 5321 H FROST PROOF F 33843 O Remove _□ Change _D Add _□ Remove _□ Change _□ Add _□ Remove Remove ____ ___ Change □ Add ☐ Remove _□ Change □ Add □ Remove ☐ Change

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e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier on The 90th day after the record is filed.		t all effective time, at 12.01 a.m. of the camer o
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Filing Fee: \$25.00