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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Sumy Coast Rental Properties #4 LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
David F. Moloncy Name of Person
Firm/Company
1323 SE 17th Street #453
Fort Laududule, FL 333/6  City/State and Zip Code  Chy biz@gm:1.com  E-mail.address: (to be used for future annual report notification)
For further information concerning this matter, please call:
David F. Moloney at (954) 584-2088  Name of Person Area Code Daytime Telephone Number
Name of reison Area Code Daytine Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunny Coast Rentu (Name of the Limited	1 Properties	#4 LLC	s on our records.)		
(A	A Florida Limited Lia	pility Company)	on var records.		
The Articles of Organization for this Limited Lia Florida document number <u>L   8 000085  20</u>		_		and ass	igned
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of t	the limited liabilit	y company he	<u>re</u> :		
The new name must be distinguishable and contain the wo	rds "Limited Liability	Company," the de	esignation "LLC" or the	abbreviation "L.	L.C."
Enter new principal offices address, if applical	ble:	<u> </u>			8
(Principal office address MUST BE A STREET	ADDRESS)	<u> </u>			<u> </u>
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				-7	F FC
Enter new mailing address, if applicable:	_			<b>&gt;</b>	25 OF C
(Mailing address MAY BE A POST OFFICE B	OX)	"			S S
	<u></u>			2	No.
B. If amending the registered agent and/o registered agent and/or the new registered offi		ce address on	our records, ente	er the name	of the new
Name of New Registered Agent:	David F.	Moloney			
New Registered Office Address:	1323 SE	17th Stree Enter Flori	‡ ‡453 ida street address	<del></del>	
	Fort Lyuderdo	de	, Florida	33316	
	1	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.

f 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>Title</u>	<u>Name</u>	Address	Type of Action
M6R	David F. Moloney	1323 SF 17" Start #453	<b>⊠</b> Add
	,	Fort Lauderdale, FL 33316	Remove
	•		□ Change
MGR	David S. Muloney	1323 SE 17th Strut #453	□ Add
	/	Fort Landerdale, FL 33316	<b>∑</b> Remove
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ective date. i	f other than	the date of fi	iling:			(optional)	1	
effective date i	s listed, the date	must be specific	and cannot be	prior to date of fili oplicable statuto	ng or more than?	00 days after filing	;) Pursuant to 60 will not be lie	05.026 sted <i>i</i>
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		Signature of	of a member or	authorized repres	entative of a mer	nber		

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Filing Fee: \$25.00