

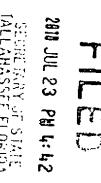
| (Rec | questor's Name) |) | | |
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| (Requestor's Name) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bus | iness Entity Na | me) | | |
| (Doc | cument Number | ·) | | |
| Certified Copies | Certificate | es of Status | | |
| Special Instructions to F | Filing Officer: | | | |
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COVER LETTER

| TO: | Registration.Sec Division of Corp | | | | | |
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| | SUNSHINE | 42 LLC | | | | |
| SUBJECT: | | | | | | |
| The en | closed Articles of A | amendment and fee(s) are sub | omitted for filing. | | | |
| Please | return all correspon | dence concerning this matter | to the following: | | | |
| | | Freddy Alequin | | | | |
| | | | Name of Person | | | |
| | | National Accounting & M | gınt, LLC. | | | |
| | Firm/Company | | | | | |
| | | 1 Purlieu Place, Suite 220 | | | | |
| Address | | | | | | |
| | | Winter Park, FL 32792 | | | | |
| | | | City/State and Zip Code | | | |
| | | natlacctg@yahoo.com | | | <u>. ~</u> | |
| | | E-mail address: (| to be used for future annual report notifica | tion) | 2016 , | |
| For fur | ther information co | ncerning this matter, please c | all: | | | |
| Freddy | / Alequin | | 407 677-5157 at () | י רי ני | ÷ | 7-1- |
| Enclose | Name of | Person following amount: | | | P# 4: 42 | |
| | 5.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Certificate of Certified Cop (additional copy | Status & | |

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

SUNSHINE 42 LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Plorida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on May 4, 2018 __ and assigned Florida document number _____18000113194 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 abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

New Registered Agent's Signature, if changing Registered Agent:

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>Title</u> | Name | Address | Type of Action |
|--------------|------------|---------------------------------|--|
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| ffective date, if other than the an effective date is listed, the date muote: If the date inserted in this bocument's effective date on the English record specifies a delayer | e date of filing: _ st be specific and car lock does not mee repartment of State d effective dat | nnot be prior to o t the applicable's records. | date of filing or i | nore than 90 days a ng requirements, | tter filing.) Purs this date will i | not be li | sted as |
| The 90th day after the red | | | | | | | |
| ated | | 2018 | | | | | |
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| Phyle | | nber or authorize | ed representativ | e of a member | | | |

Page 3 of 3

Filing Fee: \$25.00