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· ·	· · ·	COVER LETTER	
TO: Registration Sec			
Division of Corp	porations	1	
		HINE 42 LEC	
SUBJECT:	Name of Lan	uted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspor	ndence concerning this matter	to the following:	
		DONNA HOANG	
		Name of Person	
		SUNSHINE 42 LLC	
		Firm/Company	
	708	5 S ORANGE BLOSSOM TRAIL	
		Address	
		ORLANDO, FL 32809	
		City/State and Zip Code	
		UNNAHOANG88@GMAIL.COM to be used for future annual report notif	· · · · · · · · · · · · · · · · · · ·
			(cation)
for further information co	oncerning this matter, please c	ail.	
DONNA HOANG		407 624-7785	
Name of	Person		: Telephone Number
Enclosed is a check for the	e following amount: Mal	ce ck to: Division of	f Corporations
S25.00 Filing Fee	■ \$30,00 Filing Fee &	(1) \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
	Certificate of Status	Certified Copy radditional copy is enclosed)	Certificate of Status & Certified Copy tadditional copy is enclosed
Mailing Address	;:	Street Address:	
Registration S	ection	Registration Sec	
Division of Co	-	Division of Cor	•
P.O. Box 6327 Tallahassee, F		The Centre of T 2415 N. Monroe	allahassee e Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Comp</u> (A Florida Limited	pany as it now appears on our records. Liability Company))
The Articles of Organization for this Limited Liability Compan	y were filed on _05/04/2018	and assigned
florida document number 118000113194		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited lia</u>	bility company here:	
he new name must be distinguishable and contain the words "Libuted Liah		
Enter new principal offices address, if applicable:	7085 S ORANGE BLOSSOM T	RAIL
Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32809	
Enter new mailing address, if applicable:	7085 S ORANGE BLOSSOM 1	RAIL
Mailing address MAY BE A POST OFFICE BOX)	ORLANDO, FL 32809	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·	
If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>enter t</u>	<u>he name of the new regis</u>
••••••••••••••••••••••••••••••••••••••		
Name of New Registered Agent:	JA WOANT NU	NE.
New Registered Office Address: 7085 S ORAN	∜GE BLOSSOM TRAIL	

ORLANDO

_, Florida <u>32809</u> 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.

Cav

II Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address JAUN 17 AHIO: 41	Type of Action
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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e date, if other than the date of filing:	(optional)	

E. Effe (If an 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.

AUGUST 8th		
	X Duy Usy Signature of gmember or authory gd representative of a member	
	Signature of Amember or authors ed representative of a member	
	DONNA HOANG	
	Typed or printed name of signee	