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Division of Corporations

Florida Department of State  
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To:

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Fax Number : (850)617-6383

From:

Account Name : HOMSI LAW, P.A.  
Account Number : I20190000004  
Phone : (407)377-5507  
Fax Number : (407)377-5967

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SUNSHINE HEALTH AND SAFETY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

C. BRUMBLEY

**AMENDED AND RESTATED ARTICLES OF ORGANIZATION  
OF  
SUNSHINE HEALTH AND SAFETY, LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**

The Articles of Organization for this Limited Liability Company were filed on were filed on June 11, 2018, and assigned Document Number: L18000143012.

**ARTICLE II**

The street address of the principal office of the Limited Liability Company is:

1012 McDaniel Creek Court  
Oviedo, Florida 32765

The mailing address of the Limited Liability Company is:

1012 McDaniel Creek Court  
Oviedo, Florida 32765

**ARTICLE III**

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS PURPOSE.

**ARTICLE IV**

The Amended and Restated Articles of Organization shall be effective immediately when filed with the Secretary of State of Florida.

**ARTICLE V**

The name and Florida street address of the registered agent is:

Shamiso Mucherera  
1012 McDaniel Creek Court  
Oviedo, Florida 32765

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SECRETARY OF STATE  
TALLAHASSEE, FL

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature of Registered Agent:



SHAMISO MUCHERERA

The Members hereby delegate the management of the LLC to Manager(s).  
The name and address of persons(s) authorized to manage the LLC:

Operating Manager: Shamiso Mucherera  
Vice Operating Manager: Bertha Mucherera and Ruvimbo Mucherera

Address of the Managers and Officers being the same as the Principal Address of the LLC.

Signature of an Authorized Representative:

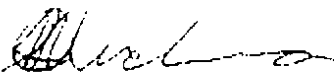


SHAMISO MUCHERERA

I am an authorized representative of the members submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the calendar year following formation of the LLC and every year thereafter to maintain active status.

The Amended and Restated Articles of Organization were adopted by the LLC on November 2, 2022.

SUNSHINE HEALTH AND SAFETY LLC



SHAMISO MUCHERERA, Operating Manager

Date: 11/2/22