18000205716

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	ECT: CANY	Sunrise, Name of Limit	LLC ted Liability Company			
The en	closed Articles of Amendmer	nt and fee(s) are subn	nitted for filing.			
Please	return all correspondence cor	icerning this matter t	o the following:			
		Scott S	Seward Name of Person			
			E Manageme	vit LLC		
		PO Box	770310 Address	<u></u>		÷
		Winter G	avillen, FL 3 City/State and Zip Code	4777		3 3 3
	<i>k</i>		La e morespa			27 000
For fu	rther information concerning	this matter, please ca	di:			PH 1: 23
	Karen Esposita	<u>-</u>	at (<u>407</u>) <u>3</u> Area Code	Daytime Teleph	One Number	22
Enclos	sed is a check for the followin	g amount: — 5ec	e cover letter re	egarding 1	ouyment -cl	neck not return
	5.00 Filing Fee	00 Filing Fee & rtificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enck		1 \$60,00 Filing Fee, Certificate of State Certified Copy (additional copy is one	is &

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



September 12, 2018

SCOTT SEWARD CMNY SUNRISE, LLC PO BOX 770310 WINTER GARDEN, FL 34777

SUBJECT: CMNY SUNRISE, LLC Ref. Number: L18000205716

We have received your document for CMNY SUNRISE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. 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) 245-6050.

Letter Number: 818A00018997

Diane Cushing Senior Section Administrator

RECEIVE SS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CMNY Sunrise LLC (Name of the Limited Liability Compan (A Florida Limited Li	1
(A Florida Limited Li	ability Company)
The Articles of Organization for this Limited Liability Company v Florida document number <u>L18000 205 716</u> .	were filed on $8/i8/i8$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, enter the name of the new
Name of New Registered Agent: N/A	
New Registered Office Address: N	Enter Florida street address
	, Florida
	Cuy 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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>M</u> _	Christopher Puller	446 W Plant St. Stel	
		Winter Garden, FL 34787	Remove
			☐ Change
_И	CMNY Holdings, Lic	44E W PlantSt. Stel	Add
		WinterGorden, FL 34787	Remove
			Change
			Add
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Note: If the	date inserted in	nan the date of date must be speci n this block does on the Departmen	s not meet tl	he applical	o date of filin	g or more th	(o) an 90 days a uirements,	fter filing.) Pi	arsuant to 605.0	0207 (d as t
The 90th	n day after ti	lelayed effect he record is f	tive date, filed.	but not	an effect	ive time	, at 12:0	1 a.m. on	the earlie	r of:
	9/24	1/18	<u>سر ،</u>	<u>, </u>						
Dated			200							
Dated			/	>						

Page 3 of 3

Filing Fee: \$25.00