

Division of Corporations

**480048975**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : THE TAX GROUP INC  
Account Number : I20180000051  
Phone : (305)223-4643  
Fax Number : (786)361-1360

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

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SUNLIFE POOLTECH, LLC**

Certificate of Status	1
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**FILED**

2019 OCT 31 P 2:17

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COVER LETTER

H190003221343

TO: Registration Section  
Division of Corporations

SUBJECT: SUNLIFE POOLTECH, 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:

JOSE A CORTE CASAL

Name of Person

Firm/Company

Address

953 WEST 77TH STREET

City/State and Zip Code

HALEAH, FL 33014

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE A CORTE CASAL at (786) 305-1102  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & 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

H190003221343

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H/19000322/343

SUNLIFE POOLTECH, LLC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/31/2019 and assigned Florida document number L18000248975

FILED 2019 OCT 31 PM 1:18

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)

953 WEST 77TH STREET

HIALEAH, FL 33014

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

953 WEST 77TH STREET

HIALEAH, FL 33014

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: JOSE A CORTE CASAL

New Registered Office Address: 953 WEST 77TH STREET

Enter Florida street address

HIALEAH

City

Florida 33014

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.

Handwritten signature of Jose A. Corte Casal

If Changing Registered Agent, Signature of New Registered Agent

H/19000322/343

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	DIEGO A SANDOVAL	3116 SW 24TH STREET	<input type="checkbox"/> Add
		MIAMI, FL 33145	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JOSE A CORTE CASAL	953 WEST 77TH STREET	<input checked="" type="checkbox"/> Add
		HIALEAH, FL 33014	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	BELKIS GONZALEZ PEREZ	953 WEST 77TH STREET	<input checked="" type="checkbox"/> Add
		HIALEAH, FL 33014	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

50 % JOSE A CORTE CASAL

50 % BELKIS GONZALEZ PEREZ

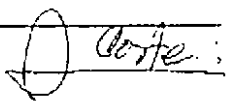
E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (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.

Dated 10/31/2019



Signature of a member or authorized representative of a member

JOSE A CORTE CASAL

Typed or printed name of signee

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