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(Address)

(Address)

(City/State/Zip/Phone #)

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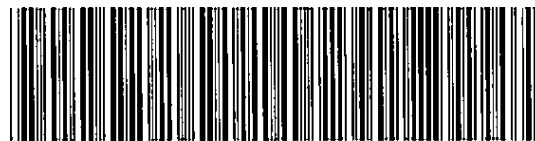
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M. SOLOMON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ALEX ALF, 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:

Mandell Sundarsingh

\_\_\_\_\_  
Name of Person

Sundarsingh Law, P.L.

\_\_\_\_\_  
Firm/Company

4440 PGA Blvd, Suite 502

\_\_\_\_\_  
Address

Palm Beach Gardens, FL 33410

\_\_\_\_\_  
City/State and Zip Code

Mandell@creativelaw.net and Paralegal@creativelaw.net

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

For further information concerning this matter, please call:

Mandell Sundarsingh, Esq.,

561 475-2298  
at ( )

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

## ALEX ALF, LLC

The Articles of Organization for this Limited Liability Company were filed on 03/04/2019 and assigned Florida document number L19000061413.

Sunflower NPR, LLC

***(Principal office address MUST BE A STREET ADDRESS)***

*(Mailing address MAY BE A POST OFFICE BOX)*

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

## Florida

Civ

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Zip Code

*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**

**MGR = Manager**  
**AMBR = Authorized Member**

☐ Change  
☒ Add  
☐ Remove  
☐ Change

100

SECRETARY OF STATE  
WASHINGTON, D.C. 20520

2018 JUN 19 AM 11:27  
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7-11

**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.

Dated 18th Day of June 2019

M. Sander  
Signature of member on

Signature of member or authorized representative of a member

Mandell Sundarsingh, Esq.,

Typed or printed name of signee