

L 19000108791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

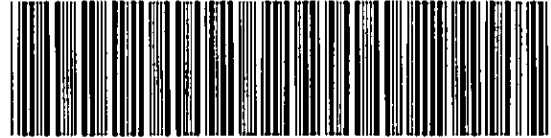
Certificates of Status X

Special Instructions to Filing Officer:

2nd //

9/13

Office Use Only



600369372866

10/04/21--01007--004 \*\*30.00

FILED

2021 SEP 13 AM 10:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LLE

Name Change

Amend.

OCT 09 2021

D CONNELL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2021 SEP 13 PM 12:40

September 1, 2021

SUNNYIE ROUNTREE  
1404 OVERBROOK DRIVE  
ORMOND BEACH, FL 32174

SUBJECT: SUNNYIE FILLEGAR, LLC  
Ref. Number: L19000108791

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

In order to CHANGE the name of your limited liability company, please complete the Amendment form (Enclosed). Name changes for your limited liability company cannot be filed with the Statement change of Registered Agent/Registered Office form.

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.

Querida R Silas  
Regulatory Specialist II

Letter Number: 121A00021074

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: \_\_\_\_\_

Sunnyie Rountree 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:

Sunnyie Rountree  
Name of Person

Sunnyie Rountree LLC  
Firm/Company

1404 Overbrook Drive  
Address

Ormond Beach, FL 32174  
City/State and Zip Code

SunnySellsSunshine@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sunnyie Rountree  
Name of Person

at ( 904 ) 403-3603  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Sunnyie Filleaar 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 4/22/2019 and assigned Florida document number L19000108791.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Sunnyie Rountree LLC

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED  
2021 SEP 13 AM 10:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

Sunnyie Rountree

New Registered Office Address:

*Enter Florida street address*

\_\_\_\_\_, Florida

City

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.*

Sunnyie Rountree

If Changing Registered Agent, Signature of New Registered Agent



This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**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.

Dated 9/7 2021

Sumnig Rountree  
Signature of a member or authorized representative of a member

Sunnyie Rountree  
Typed or printed name of signer