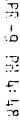
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Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registra Division	tion Secti of Corpo	ion grations			
	shine Trif	ecta LLC			
SUBJECT:		Name of Limit	ed Liability Company		
The enclosed Arti	Name of Limited Liability Company reticles of Amendment and fee(s) are submitted for filing. It correspondence concerning this matter to the following: Bill Bright Name of Person Sunshine Trifecta LLC Firm/Company 6443 Rolling Tree Street Address Jacksonville, Florida 32222 City/State and Zip Code sail45@gmail.com E-mail address: (to be used for future annual report notification) permation concerning this matter, please call: at (
Please return all c	correspond	dence concerning this matter to	o the following:		
		Bill Bright			
			Name of Person		
		Sunshine Trifecta LLC			
			Firm/Company		
		6443 Rolling Tree Street			
			Address		
		Jacksonville, Florida 32222	:		
			City/State and Zip Code		
		sail45@gmail.com		(Faction)	
				(Headon)	6.3
For further infor	mation co	ncerning this matter, please ca	all:		20.1
Bill Bright					
	Name of	Person	Area Code Daytin	ne Telephone Number	
Enclosed is a che	eck for the	e following amount:			
■ \$25.00 Filin	ig Fee		Certified Copy	Certificate Certified (ng Fee, e of Status & Copy

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

Sunshine Trifecta LLC	°
(Name of the Limited Liability Compa (A Florida Limited L	av as it now annears on our records.)
ne Articles of Organization for this Limited Liability Company orida document number <u>L19000292713</u>	£.
is amendment is submitted to amend the following:	
If amending name, enter the new name of the limited liab	ility company here:
te new name must be distinguishable and contain the words "Limited Liabil	ity Company." the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	6443 Rolling Tree Street
Principal office address MUST BE A STREET ADDRESS)	Jacksonville, Florida 32222
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>)	
If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>enter the name of the new reg</u> ist
Name of New Registered Agent:	
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.

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>	Address	Type of Action
AMBR	Tyler Morgan Carolino	862440 North Hampton Club Way	= Add
		Fernandina Beach, Florida 32034	
			Change
			□Add
			□ Remove
			□Change
		_	
			□Remove
			Change
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Remove
			Change

Effective date, if other than the date of filing: [In effective date, if other than the date of filing: [In 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 Actes: [If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. [In effective date and the date of filing or more than 90 days after filing frequirements, this date will not be listed as document's effective date on the Department of State's records. [In effective date and the date of filing or more than 90 days after filing frequirements, this date will not be listed as document's effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the date of the			<u></u>					-
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Signature of a member or authorized representative of a member	Dated	April 6		2020	-51	Sud	A	
			Signatur	e of a member or au	thorized representa	tive of a member	· · · · · · · · · · · · · · · · · · ·	