420000007559

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2001100 21110, 11110)
(Document Number)
(2000)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
. ماه،
10/2

Office Use Only



800353237838

10/15/20--01020--003 **25.00

2020 OCT -2 P I: 47

4400 Jc



September 30, 2020

Registration Section
Division of Corporations

Subject: Sunset Tree Care, LLC

I am enclosing articles of amendment for filing. I am requesting that this matter be expedited.

This amendment was originally filed on July 16, 2020 and only completed about two weeks ago. Unfortunately, the name of Richard Henrichon was misspelled to read Richard Henderson. I am including the original amendment request to show that we submitted the name correctly.

We have been waiting to establish a bank account and until spelling of my name is corrected, we can't set that bank account up. For that reason, I am requesting a quick handling rather than waiting two more months.

I am also including a check for \$25. If you feel that we need to pay for this mistake, please cash the check and move forward quickly. Otherwise please destroy the check.

Thank you for your consideration,

Richard Henrichon

Sunset Tree Care, LLC

richard.henrichon@gmail.com

386 795-2409

COVER LETTER

Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy	Div	ision of Cor	porations		
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: Richard Henrichon	SUBJECT:	Sunset Tree	Care, LLC		
Please return all correspondence concerning this matter to the following: Richard Henrichon			Name of Lin	nited Liability Company	
Richard Henrichon Sunset Tree Care, LLC Firm/Company 662 Marina Point Drive Address Daytona Beach, FL 32114 City/State and Zip Code richard.henrichon@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard Henrichon Name of Person Area Code Daytime Telephone Number Finclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy Ladditional copy is enclosed) Certified Copy	The enclosed	Articles of a	Amendment and fee(s) are sul	bmitted for filing.	
Sunset Tree Care, LLC Firm/Company	Please return	all correspoi	ndence concerning this matter	to the following:	
Sunset Tree Care, LLC Firm/Company 662 Marina Point Drive Address Daytona Beach, FL 32114 City/State and Zip Code richard.henrichon@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard Henrichon Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (certified Copy (certified Copy)			Richard Henrichon		
Firm/Company 662 Marina Point Drive Address Daytona Beach, FL 32114 City/State and Zip Code richard.henrichon@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard Henrichon Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (certified Copy (additional copy is enclosed)				Name of Person	
Address Daytona Beach, FL 32114 City/State and Zip Code richard.henrichon@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard Henrichon Name of Person Area Code Daytime Telephone Number Inclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (certified Copy (certified Copy) (certified Copy (certified Copy) (certified Copy) (certified Copy (certified Copy)			Sunset Tree Care, LLC		
Daytona Beach, FL 32114 City/State and Zip Code richard.henrichon@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard Henrichon Name of Person Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certificate Of Status & Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)				Firm/Company	
Daytona Beach, FL 32114 City/State and Zip Code richard.henrichon@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard Henrichon Area Code Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy (additional copy is enclosed)			662 Marina Point Drive		
City/State and Zip Code richard.henrichon@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard Henrichon 386				Address	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard Henrichon			Daytona Beach, FL 32114		
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Richard Henrichon 386			·	•	
Richard Henrichon 386 795-2409 at (
Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy	For further in	formation co			theation)
Enclosed is a check for the following amount: \$\Begin{array}{ll} \text{S25.00 Filing Fee} & \text{S55.00 Filing Fee} & \text{S60.00 Filing Fee}, \\ \text{Certificate of Status} & \text{Certified Copy} & \text{Certificate of Status} & \text{Certified Copy} & \text{Certified Copy} \\ \text{(additional copy is enclosed)} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} & \text{Certified Copy} \\ \text{Certified Copy} & Cer	Richard Henrichon				_
■ \$25.00 Filing Fee \$\ \text{Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\subseteq} \ \$\$55.00 Filing Fee & \text{Certified Copy (additional copy is enclosed)} \text{\$\subseteq} \ \$\$55.00 Filing Fee & \text{Certified Copy (additional copy is enclosed)} \text{\$\subseteq} \ \$\$\$ \$\$55.00 Filing Fee & \text{Certified Copy (additional copy is enclosed)} \text{\$\subseteq} \ \$\$\$\$ \$\$\$\$ \$		Name of	Person	Area Code Daytim	e Telephone Number
Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy	Enclosed is a	check for the	following amount:		
	≡ \$25.00 Fi	ling Fee		Certified Copy	Certificate of Status &

Mailing Address: Registration Section Division of Corporations

Registration Section

TO:

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

Sunset Tree Care, LLC

company has been notified in writing of this change.

(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 12/30/2019 _____ and assigned Florida document number 1.20000007559 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 "LLC." 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) 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: New Registered Office Address: Enter Florido street address City 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

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 = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Pres	Timothy Ogden	662 Marina Point Dr., Daytona Beach, FL 32114	🗆 Add
			□Remove
		Change title to MGR	= Change
MGR	Richard Henderson	Richard Henrichon	□Add
			Remove
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

								_
_								-
								_
								_
_	-	<u>_</u>			<u> </u>	<u> </u>	_	_
								_
				 	-	<u>-</u>		-
_						 -		_
_			<u></u>					_
_								
					_			_
_		<u> </u>		<u> </u>				_
		_				.		_
_								
								_
				 .			<u> </u>	_
_		_						_
				- 				_
								-
	<u> </u>		- . <u>-</u>		<u> </u>	<u> </u>		-
an effect lote: If	e date, if other than the tive date is listed, the date me the date inserted in this b it's effective date on the L	ist be specific and lock does not n	f cannot be prior neet the applic	cable statutory	g or more than 9 filing require	(option: 0 days after fili ments, this da	ng \ Purcuant to 60	5.0207 (ted as t
record s I is filed	specifies a delayed effectiv	ve date, but not	an effective t	ime, at 12:01	a.m. on the ea	rlier of: (b)	The 90th day afte	er the
	30/2020	,						
ated								
ated	T.ol							
ated <u>-</u>	J.ol	Signature of a n	nember or author	orized represen	tative of a mem	ber		

Ē.

Filing Fee: \$25.00