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20 FEB 24 PM 5:13
FEB 24 2020
FEB 24 2020

MAR 13 2020

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SUNSET AUTO GROUP 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:

MAX KUTSAYEV

Name of Person

SUNSET AUTO GROUP LLC

Firm/Company

6675 102ND AVE N UNIT D

Address

PINELLAS PARK, FL 33782

City/State and Zip Code

SUNSETAUTOGROUPLLC@YAHOO.COM

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

For further information concerning this matter, please call:

MAX KUTSAYEV

727 301 - 2271
at ()

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 Address:

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

SUNSET AUTO GROUP LLC

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>	<u>Address</u>	<u>Type of Action</u>
MGR	MAX KUTSAYEV	6675 102ND AVE N UNIT D	<input checked="" type="checkbox"/> Add
		PINELLAS PARK, FL 33782	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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CLERK OF THE
CITY OF TAMPA

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

Adding FBI/EIN # 84-4476564

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FBI - MEMPHIS

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 FEBRUARY 19TH 2020

Signature of a member or authorized representative of a member

MAX KUTSAYEV

Typed or printed name of signee

Filing Fee: \$25.00