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## **COVER LETTER**

TO: Registration Se Division of Cor	•				
Sunset 20 L	LC				
SUBJECT:		ited Liability Company	<del></del>		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Julian Eisenberg				
		Name of Person			
	Sunset 20 LLC				
		Firm/Company			
	1413 Sunset Harbor Drive				
		Address			
	Miami Beach/ Florida. 331	39			
		City/State and Zip Code			
	sunset20llc@gmail.com				
	E-mail address: (	to be used for future annual report not	tification)		
For further information c	oncerning this matter, please c	all:			
Julian Eisenberg		786 972-5607 at ()			
Name o	f Person	Area Code Daytir	ne Telephone Number		
Enclosed is a check for the	ne 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		Street Address:	aatian		
Registration Section Division of Corporations			Registration Section Division of Corporations		
P.O. Box 632			The Centre of Tallahassee		
Tallahassee, 1	FL 32314	2415 N. Monro	oe Street, Suite 810		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunset 20 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  $\frac{04/06/2020}{1}$ and assigned Florida document number 120000096602 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 "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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cin

## 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
President	Bruce Eisenberg	1413 Sunset Hurbor Dr, Apt #207, Miami Beach, FL	35 <b>∃</b> Add
			□Remove
			Change
MGR	Adam Eisenberg	1413 Sunset Harbor Dr. Apt #207, Miami Beach, FL	.3E <b>≅</b> Add
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ective date, if other than the on effective date is listed, the date must	late of filing:	ate of filing or more than 90 day	(optional) ys after filing.) Pursuant to 605,020
te: If the date inserted in this blo cument's effective date on the De		e statutory filing requiremen	ts, this date will not be listed a
ecord specifies a delayed effective is filed.	date, but not an effective time.	at 12:01 a.m. on the earlier	of: (b) The 90th day after th
December 5th	2021		
		ed representative of a member	

Typed or printed name of signee