

L2 0000 103786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

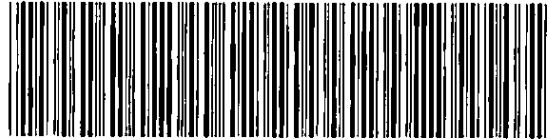
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2024 AUG 27 PM 3:52

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunshine Senior Solutions 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:

Dana Pessoa

Name of Person

Sunshine Senior Solutions LLC

Firm/Company

101 E Linton Blvd STE 404-B

Address

Delray Beach FL 33483

City/State and Zip Code

Sunshineseniorsolutions20@gmail.com

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

For further information concerning this matter, please call:

Dana Pessoa

Name of Person

at 501, 528 1592

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

FILED
2024 AUG 21 PM 3:53

Sunshine Senior Solutions 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 April 15 2020 and assigned
Florida document number L20006103786

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)

100 E Linton Blvd
STE 404-B
Delray Beach FL 33483

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

100 E Linton Blvd
STE 404-B
Delray Beach FL 33483

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:

100 E Linton Blvd STE 404B
Enter Florida street address
Delray Beach Florida 33483
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 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>
<u>AMBR</u>	<u>Dana Pessca</u>	<u>601 N Congress Ave</u> <u>STE 435-B</u>	<input type="checkbox"/> Add
		<u>Delray Beach FL 33445</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>AMBR</u>	<u>Mikheil Tabidze</u>	<u>100 E Linton Blvd</u>	<input checked="" type="checkbox"/> Add
		<u>STE 404-B</u>	<input type="checkbox"/> Remove
		<u>Delray Beach FL 33483</u>	<input type="checkbox"/> Change
<u>Registered Agent</u>	<u>Charles Vickery</u>	<u>601 N Congress Ave</u>	<input type="checkbox"/> Add
		<u>STE 435-B</u>	<input checked="" type="checkbox"/> Remove
		<u>Delray Beach FL 33445</u>	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

Dana Pessoa, is no longer an owner, authorized member, authorized official, manager etc.. of Sunshine Senior Solutions LLC.

Mikhail Tabidze is now the owner of Sunshine Senior Solutions LLC

Charles Vickery is no longer the registered agent of Sunshine Senior Solutions LLC

E. Effective date, if other than the date of filing: _____ (optional)

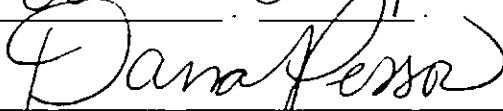
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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

August 22nd 2024



Signature of a member or authorized representative of a member

Dana Pessoa

Typed or printed name of signer

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunshine Senior Solutions 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:

Dana Pessoa

Name of Person

Sunshine Senior Solutions LLC

Firm/Company

101 E Linton Blvd STE 404-B

Address

Delray Beach FL 33483

City/State and Zip Code

SunshineSeniorSolutions20@gmail.com

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

For further information concerning this matter, please call:

Dana Pessoa

Name of Person

at (561) 528 1592

Area Code

Daytime Telephone Number

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☐ \$25.00 Filing Fee

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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 Senior Solutions LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2024 AUG 27 PM 3:52

The Articles of Organization for this Limited Liability Company were filed on APRIL 15 2020 and assigned Florida document number L20000103786

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)

100 E Linton Blvd
STE 404-B
Delray Beach FL 33483

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

100 E Linton Blvd
STE 404-B
Delray Beach FL 33483

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:

100 E Linton Blvd STE 404 B
Enter Florida street address
Delray Beach, Florida 33483
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 Changing Registered Agent, Signature of New Registered Agent

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

Dana Pessoa, is no longer an owner, authorized member, authorized official, manager etc. of Sunshine Senior Solutions LLC.

Mikhail Tabidze is now the owner of Sunshine Senior Solutions LLC

Charles Vickery is no longer the registered agent of Sunshine Senior Solutions LLC

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 August 22nd, 2024
Dana Pessoa

Signature of a member or authorized representative of a member

Dana Pessoa

Typed or printed name of signer

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>
<u>AMBR</u>	<u>Daniel Pessoni</u>	<u>601 N Congress Ave</u> <u>STE 435-B</u>	<input type="checkbox"/> Add
		<u>Delray Beach FL 33445</u>	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
<u>AMBR</u>	<u>Mikheil Tabidze</u>	<u>100 E Linton Blvd</u>	<input checked="" type="checkbox"/> Add
		<u>STE 404-B</u>	<input type="checkbox"/> Remove
		<u>Delray Beach FL 33483</u>	<input type="checkbox"/> Change
<u>Registered Agent</u>	<u>Charles Vickery</u>	<u>601 N Congress Ave</u>	<input type="checkbox"/> Add
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