## L21000013728

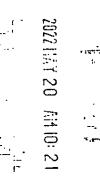
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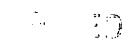
of 7/23/2022

## **COVER LETTER**

то:	Registration Se Division of Co			
2005.02		N SUN RV LLC		
SUBJEC	.1:	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Steven Livhsin		
			Name of Person	
		Livshin Emerprises, LLC		
			Firm/Company	<del>.</del>
		16122 Rosecroft Ter		
			Address	
		Delray Beach, FL 33446		
			City/State and Zip Code	
		steven@four9group.com		
Voe fueth	use information z	E-mail address: ( concerning this matter, please c	to be used for future annual report not	tification)
		concerning this matter, prease c		
Steven L		··-	561 756-2200 at ()	
	Name (	of Person	Area Code Daytir	ne Telephone Number
Enclosed	l is a check for t	he following amount:		
<b>■ \$25</b> .	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre Registration		<u>Street Address:</u> Registration Se	ection
	Division of C		Division of Co	
	P.O. Box 631 Tallahassee.		The Centre of 2415 N. Monre	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2022 HAY 20 AM 10: 21

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(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  $\frac{01/19/2021}{1}$ and assigned Florida document number  $\frac{L21000013728}{}$ 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 Florida street address

## 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.

City

\_. Florida \_\_\_

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Mgr	ALL DAY INVESTMENTS LLC	15532 GLENCREST AVE	□Add
		DELRAY BEACH, FL 33446	■Remove
		<del> </del>	□Change
Mgr	CAPUTA, MICHAEL	22355 BOYACA AVENUE	□ Add
		BOCA RATON, FL 33433 UN	■Remove
			□Change
<u></u>			□Add
		<del></del>	□Remove
		<del></del>	□ Change
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ffective date, if other the an effective date is listed, the described in fective date on the date of	this block does not	: meet the applica	to date of filing or mable statutory filin	ore than 90 days a g requirements.	otional) tier filing.) Pursuan this date will not	t to 605,0207 ( be listed as t
record specifies a delayed e d is filed	Tective date, but no	ot an effective tii	ne. at 12:01 a.m.	on the earlier of:	(b) The 90th da	ay after the
		2022				
May 16	Lushin	_·	,			
May 16	Lun-lun Signature of a	_·	rized representative	of a member		_

Filing Fee: \$25.00