L21000140738

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COVER LETTER

Division of Cor	porations		
Sunstyled I	1.C	•	•
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing	
	ondence concerning this matter		
rease return an correspo	indence concerning this matter	to the ronowing.	
	Melissa Moore		
		Name of Person	
	Sunstyled LLC		
		Firm/Company	
	9143 Cypress Dr S		
		Address	
	Fort Myers, FL 33967		
		City/State and Zip Code	
	sunstyledlle@gmail.com E-mail address: ()	to be used for future annual report notif	fication)
for further information c	oncerning this matter, please ca	all:	
Melissa Moore		239 4784705	
Name o	f Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for th	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
<u>Mailing Addres</u>	: <u>s:</u>	Street Address:	
Registration S	Section	Registration Sec	ction

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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Registration Section

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

Sunstyled LLC				2075 77 58 77 10:01
(Name of the Lim	ited Liability Compa (A Florida Limited	ny as it now appe Liability Company	ars on our records.)	·
The Articles of Organization for this Limited I Florida document number 1.21000140738	_iability Company	were filed on _	03/25/2021	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company l	nere:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the	designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	18731 3 Oaks	Parkway Fort Mye	rs FL 33967 STE 9-218
(Principal office address MUST BE A STRE.	ET ADDRESS)			
Enter new mailing address, if applicable:		18731 3 Oaks	Parkway Fort Mye	rs FL 33967 STE 9-218
Mailing address MAY BE A POST OFFICE	E BOX)			
B. If amending the registered agent and/or agent and/or the new registered office address.	ess here:		records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:	Melissa Moore	· · · · · · · · · · · · · · · · · · ·		
New Registered Office Address:	18731 3 Oaks I	Parkway # 9-218	orida street address	
	Fort Myers	t:nter F1		. 33067
	1 OLI MÁCIS	City	, Flori	ida 33967 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>	Type of Action
AMBR	Melissa Moore	18731 3 Oaks Parkway Fort Myers FL 33967 STE 9-	21 □Add
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fecti	ive date, if other than the date of filing: (optional)
	ective date is listed, the date must be specific and cannot be prior to date of tiling or more than 90 days after filing.) Pursuant to 605.02 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
	ent's effective date on the Department of State's records.
	d 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
is fil	led.
	6/23/2022
ted	<u> </u>
	100 11 . 100 32 1-0 3
	Signature of a member or authorized representative of a member
	regulation is a member of intinormen representative of a member