Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000362318 3)))



H210003623183ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number

: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUNSHINE & HEROES INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

SEP 2 9 2021

A. LUNT

Selectionic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunshine & Heroes Investments LLC

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

(A Florida Limited Liability Company)

(A Florida L	imited Liability Company)		O 3	
The Articles of Organization for this Limited Liability Cor Florida document number L21000419287	npany were filed on 09/	22/2021	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	d liability company here	<u>;</u> ;		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the desi	gnation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	<u>(SS)</u>			
				
Enter new mailing address, if applicable:			<u></u>	
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	office address on our rec	ords, <u>enter the name</u>	of the new register	
Name of New Registered Agent:				
New Registered Office Address:	Enter Florid	a street address		
		Florida		
	Cuy		Zip Code	
New Registered Agent's Signature, if changing Registered	Agent:			
Thereby accept the appointment as registered agent ar	nd agree to act in this ca	pacity. I further agr	ee to comply with ti	

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
MGR	GRACE & GRIT LIFESTYLES LLC	7901 4TH ST N STE 300	□Add
		ST. PETERSBURG, FL 33702	∑ Remove
			□Change
AMBR	Kathy Lee Quach	7901 4TH ST N STE 300	∑ Add
		ST. PETERSBURG, FL 33702	□Remove
			□ Change
			□Add
			□ Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Add
			□Remove
			□ Change

		71.00 1 PROD			
					
			4		
			<u>,</u>	22	:
	<u>-</u>			<u>21</u> S	
				2021 SEP 28	
				A	i
		<u></u>		<u></u>	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
				•	
ffective date, if other than the date of fif an effective date is listed, the date must be specific Note: If the date inserted in this block does n	and cannot be prior	to date of filing or mo	ore than 90 days after fig requirements, this o	iling.) Pursuant to 605.	.020 ed a
locument's effective date on the Department	of State's records.		•		
record specifies a delayed effective date, but	not an effective ti	me at L2:∩La mi o	on the earlier of: (h)	The 90th day after	r the
d is filed.	in an arrective in				
September 28	2021				
	Rilux Pul				
	Kiluy Tail	k prized representative	of a member		
Signature c	or a member or autho	mizeu representative	or a memoer		

Filing Fee: \$25.00