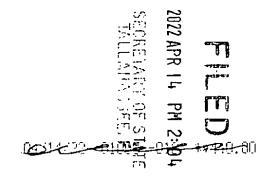
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(Requ	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

Registration Section Division of Corporations

Etheron I.	LC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Klaus Duell		
		Name of Person	
	Inner Value LLC		
		Firm/Company	
	915 67th St NW		
		Address	
	Bradenton, FL. 34209		
		City/State and Zip Code	
	unknown		
	E-mail address: (to be used for future annual report not	ification)
For further information	concerning this matter, please co	all:	
Klaus Duell		941 2643380	
Name	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30,00 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 Addre</u> Registration		<u>Street Address:</u> Registration Se	ection
Registration Section Division of Corporations		Division of Co	
P.O. Box 6327		The Centre of	Fallahassee
Tallahassee, FL 32314		2415 N. Monre	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Sunstatosoreen LLC

company has been notified in writing of this change.

	Hiability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number $\frac{1.21000462527}{1.21000462527}$	y were filed on 10/25/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	Karl-Zoergiebl-Strasse 64	
(Frincipal office daures stort the 3 of the 2 70770E35)	50259 Pulheim, Germany	
Enter new mailing address, if applicable:	Karl-Zoergiebl-Strasse 64	
(Mailing address MAY BE A POST OFFICE BOX)	50259 Pulheim, Germany	
agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new registers
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the n	ame of the new registere
agent and/or the new registered office address here:	e address on our records, enter the n	ame of the new registers
agent and/or the new registered office address here: Name of New Registered Agent:		

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

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>	Address	Type of Action
AMBR	Roman Ropohl	Karl-Zoergiebl-Strasse 64, 50259 Pulheim, Germany	= Add
			□Remove
			□Change
AMBR Eva Ropohl	Karl-Zoergiebl-Strasse 64, 50259 Pulheim, Germany	≣Add	
			□Remove
			□Change
MBR lune Value LLC	915 674 h St NW, Braclenton, FL, 34	<u>20</u> 9 _{□Add}	
		Remove	
		□Change	
			□ Add
		<u></u>	ERemove
			□Change
			□Add
•		□Remove	
		□Change	
		□Add	
			□Remove
			□ Change

). If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an et Note:	tive date, if other than the date of filing:
he reco ord is t	rd 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 iled.
Dated	Signature of a member deadthorized representative of a member
	Signature of a member of adithorized representative of a member
	Klaus Duell
	Typed or printed name of Signee