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(Requestor's Name)
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COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Sunset overall Solut	tion (ILC.	
Name of I	Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are	submitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Frank F	Name of Person	,
	/ Name of Person	
Sunset over	all solutions LLC Firm/Company	
1425 SE	31st Te/	
	Address	
cape Coral	FL 33 90 4 City/State and Zip Code	
305 Cape Co	is: (to be used for future annual report not	tication)
		incanni,
For further information concerning this matter, pleas	e call:	
Frank Postal	. 20 . / 27 . 6	-100
Frank Finley Name of Person	at (<u>139</u>) <u>677- 5</u> Area Code Daytin	ne Telephone Number
	·	'
Enclosed is a check for the following amount:		
□ \$25.00 Filing Fee	☐ \$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:	Street Address:	antian
Registration Section Division of Corporations	Registration Se Division of Co	
P.O. Box 6327	The Centre of	•
Tallahassee, FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunset overall solutions LLC

(A Florida Limited I	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 22 000 1985 09</u> .	were filed on April 126/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1421 SE 315T Ter
(Principal office address MUST BE A STREET ADDRESS)	cape coral FC 33904
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1421 SE 314 Ter 33904 335
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	
	in Mocke
New Registered Office Address: 1411	SE 319 Ter. Enter Florida street address
Cape Co	City Florida 33904 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>	Address	Type of Action
m GR	Cody Finley	1414 Everest Park way	□ Add
	,	cape coral FL 33904	
		 	□Change
			□Add
			□Remove
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cord speci	-					(b) The 90th day	after the
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