L22000271179

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4/3/23 V.W.

FILED 2023 JAN 30 AM 8: 21 SESTE MENSEE. FIL TO: PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING: Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM: National Corporate Headquarters, Inc.

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE: Monday, January 23, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

• Articles of Amendment

For MOORE CUSTOM HOMES, LLC

We have included payment in the amount of \$25.00 for the following fees:

• Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502

COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	CT: MOORE	CUSTOM HOMES, LL Name of Limi	Cited Liability Company	
The end	closed Arucles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please .	return all correspo	ndence concerning this matter	to the following:	
		Corpor	ate Maintenance Lea	ad
			Name of Person	
		Proc	essing Department	
			Firm/Company	
		1	450 Vassar St	
		· · · · · · · · · · · · · · · · · · ·	Address	
			Reno, NV 89502	
		111.	City/State and Zip Code	
				
			to be used for future annual report notifi	cation)
For tur	ther information c	oncerning this matter, please or	all:	
	Process	ing Department	at (800) 638-2320	
	Name o	t Person		Telephone Number
Enclos	ed is a check for th	ne following amount.		
□ \$2:	5.00 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)
	Registr Divisio P.O. B	ING ADDRESS: atton Section on of Corporations ox 6327 assec, FL 32314	STREET/COURI Registration Section Division of Corport Clifton Building 2661 Executive Cen) itions

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

· · · · · · · · · · · · · · · · · · ·	STOM HOMES, LLC	
(<u>Name of the Limited Liability C</u> (A Fiorida Li)	Jonipany as it now appears on our records.) inited Liability Company)	
The Articles of Organization for this Limited Liability Con-	npany were filed on 06/14/2022	and assigned
Florida document number L22000271179		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
SUNNY STATE	INVESTMENTS, LLC	
The new name must be distinguishable and contain the words "Limited	I Liability Company," the designation "LLC" or the	nc abbreviation "L.L.C,"
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	2023
		10 % T
		3 二
Enter new mailing address, if applicable:		30 1
(Mailing address MAY BE A POST OFFICE BOX)		SS 2
		E 8
B. If amending the registered agent and/or register registered agent and/or the new registered office address		ter the name of the ne
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street address	
	, Florid:	ì
-	Cig	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.

11 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>	Name	Address	Type of Action	
			Remove	
			Change	
			_ □ Remove	
			☐ Change	
			Add	
			Remove	
			☐ Change	
			□ Remove	
			☐ Change	
		-31	Add	
			Remove	
			☐ Change	
			Remove	
			□ Change	

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: N/A (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records
If the record 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 record is filed.
Dated
Menature of a member of authorized representative of a member
Dylan Moore

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00