L22000277713

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COVER LETTER

TO:

TO: Registration Division of C			
	nshinerental LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Taradath Sonny		
		Name of Person	
		Firm/Company	
	480 29th St. SW		
		Address	
	Naples FL 34117		
	sunnysunshinerental@gmai	City/State and Zip Code	
		to be used for future annual report notif	ication)
For further informatio	n concerning this matter, please ca	all:	
Taradath Sonny		239 961 9016 at ()	
Nan	c of Person	Area Code Daytimo	: Telephone Number
Enclosed is a check for	r the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Add</u> Registratio		Street Address: Registration Sec	ction
Division o	f Corporations	Division of Cor	porations
P.O. Box 6	327 e. FL 32314	The Centre of T 2415 N. Monro	ananassee e Street, Suite 810

Tallahassee, FL 32303

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

Sunnysunshinerental LLC	
(<u>Name of the Limited Liability Company a</u> (A l ² lorida Limited Liabi	s it now appears on our records.) lity Company)
The Articles of Organization for this Limited Liability Company wer	re filed on 06/17/2022 and assigned
Florida document number L22000277713	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	company here:
Sunny Sunshine Rental LLC	
The new name must be distinguishable and contain the words "Limited Liability C	Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2
(Principal office address MUST BE A STREET ADDRESS)	77.
_	P. F
Enter new mailing address, if applicable:	SSE A M
(Mailing address MAY BE A POST OFFICE BOX)	Trong :
-	
B. If amending the registered agent and/or registered office addingent and/or the new registered office address here:	ress on our records, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City 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
			□Add
			□Remove
			□ Change
			□Add
			□ Remove
			Change
			□ Add
			□ Remove
			□Change
			□Add
			□Remove
		 -	□Change
			□ Add
			□Remove
			□Change
			□Remove
			□ Change

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Effective date, if other than the date of filing: [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 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The erecord 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 rd is filed. Dated [O6/21/2022] [Signature of a member or authorized representative of a member]		
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