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1883 W. Royal Hunte Dr., Suite 200 Cait Chancey, paralegal Cedar City, Utah 84720 <u>Cait.Chancey@kkoslawyers.com</u>
Phone 435-586-9366
Fax 435-586-9491

October 24, 2022

Department of State Division of Corporations The Center of Tallahassee 2415 N. Monroe Street Suite 810 Tallahassee, FL 32303

To Whom It May Concern:

Enclosed for processing are duplicates of the Articles of Amendment for **Sunburnt Holdings**, **LLC**. Also enclosed is a check in the amount of \$25.00 to cover the filing fee.

If you find the enclosed document acceptable, please note your acknowledgment of receipt on the copy and return it to my office with the enclosed return envelope as noted above.

Thank you for your anticipated attention to this matter.

Very truly yours.

KYLER KOHLER OSTERMILLER & SORENSEN, LLP

Cait Chancey Paralegal

Enclosure

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunburnt Holdings LLC	•		
(Name of the Limited Liab (A Flori	ility Company as it now appears on our records.) ida Limited Liability Company)	,	
ticles of Organization for this Limited Liability document numbe. L2200030311	Company were filed on July 7, 2022	and assig	gned
nendment is submitted to amend the following:			
mending name, enter the new name of the li	mited liability company here:		
name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" of	or the abbreviation "L.L.	.C."
new principal offices address, if applicable:			/ ==
pal office address MUST BE A STREET ADL	ORESS)		
new mailing address, if applicable: <u>IR address MAY BE A POST OFFICE BOX</u>			
mending the registered agent and/or register and/or the new registered office address here		e name of the new	<u>registered</u>
Name of New Registered Agent:			
New Registered Office Address:		;; E	2 2
	Enter Florida street address	, , , , , , , , , , , , , , , , , , ,	5
	, Flor	i đa	<u> </u>
	Ciŋ·	Zip Code	- 1
gistered Agent's Signature, if changing Register	red Agent:	3	
y accept the appointment as registered agen ons of all statutes relative to the proper and the obligations of my position as registered a filed to merely reflect a change in the register my has been notified in writing of this change	complete performance of my duties, and agent as provided for in Chapter 605, F. red office address. I hereby confirm that	I am familiar with S. Or, if this docum	and ent is
	If Changing Registered Agent, Signature of	New Registered Agent	

ending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added aoved from our records:

= Manager

R = Authorized Member

Name	Address	I ype of Actio
Sharon Mittelman	8835 NE 176th Street	⊟Add
	Bothell, WA 98011	□ Remove
		Change
Shai Mittelman	304 Chartwell Drive	
	Silver Spring, MD 20904	□Remove
Aaron Holsipple	1322 Swift Creek Way	= Add
	Winter Springs, FL 32708	□Remove
Jacob Stoll	2921 S. Semoran Blvd, #238	∃ Add
	Orlando, FL 32822	□Remove
		Change
Jason Eckmann	417 Bramble Way	= Add
	Minneola, FL 34715	□Remove
		Change
		□Add
		□ Remove

ve date, if other than the date of filing:
ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
October 24, 2022.
Signature of a member or authorized representative of a member
Sharon Mittelman Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00