## h22000375191

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J DENNIS
FEB 2 3 2023
R V13/23

Office Use Only



800395093878

09/30/22--01008--026 \*\*25.00

## COVER LETTER

TO:

Registration Section

Taliahassee, FL 32314

Division of Cor	porations	•	
	LOAŅS, LLC	·	•
SUBJECT:	Name of Limit	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ndence concerning this matter t	o the following:	
	RAMONE WALKER		
		Name of Person	
	TAXDRILL		<u> </u>
		Firm/Company	
	8412 SW 29TH ST		
		Address	
	MIRAMAR, FL 33025		
		City/State and Zip Code	
	TAXDRILLINFO@GMAII	COM to be used for future annual report	notification)
For further information of	concerning this matter, please ca		
RAMONE WALKER	•	954 6962732	
Name C	of Person	at () Area Code Da	rime Telephone Number
Enclosed is a check for t	he following amount:		
S25.00 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)
Mailing Addre		Street Addres Registration	
Registration Division of C			Corporations
P.O. Box 633		The Centre	of Tallahassee

The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

PRIVATE LOANS, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 08/25/2022 \_ \_\_\_\_ and assigned Florida document number <u>L22000375191</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Sunshine Ventures and Investments LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.I.C." or the abbreviation "L.I.C." GO ATTN: ANDRE SENIDE Enter new principal offices address, if applicable: 2150 NW 100th Ave Pembroke Pines, FL 33024 (Principal office address MUST BE A STREET ADDRESS) 2150 NW 100th Ave Pembroke Pines, FL 33024 Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Cirv

## 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 =	<b>Authorized Member</b>

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			\ \ \_Add
			□Remove
			☐ Change
			□Add
			Remove
			□ Change
			□ Add
			Reniove
			\ \ \_Add
			□Remove
			Change
			□Remove
			□ Change

					<del></del>
·-					<del></del>
		<del></del>			
			<del></del>		
	<del></del>				
			_	,	
				·	<del></del>
		<del></del>			
		<u></u> .			
ective date, if other the effective date is listed, the te: If the date inserted in tument's effective date of	n this block does not r	meet the applicabl	date of filing or more ( le statutory filing re	(optional han 90 days after filin quirements, this dat	l) g.) Pursuant to 605,020' e will not be listed as
cord specifies a delayed s filed.	effective date, but not	t an effective time	r, at 12:01 a.m. on t	he earlier of: (b) T	The 90th day after the
ed <u>0//06</u>	1/2023	·	. •		
' / /	,	11/2	,		
,	<del></del>	4HCan	_		
	Signature of a	melinber or authoriz	red representative of a	member	

Filing Fee: \$25.00