K22C00	433171
(Requestor's Name)	

(Ac	ddress)
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PICK-UP	
(Bu	usiness Entity Name)
(De	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only

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FILED 2022 OCT 25 AM 8: 11

A. RIVERS

## **COVER LETTER**

## TO: Registration Section Division of Corporations

Sunshine Luxury Retreat LLC

SUBJECT: \_\_\_

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Margine Silva

Name of Person

Sunshine Luxury Retreat

Firm/Company

3534 Silver Lace Ln. # 42

Address

Boynton Beach FL 33436

City/State and Zip Code

maresca.ms@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for 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 Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

Sunshine Luxury Retreat. LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I.	ny as it now appears on our records.) lability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L22000433171</u> .	were filed on October 07, 2022	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	<u>ility company here</u> :	
N/A		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
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:	Margine Silva	<u> </u>	6.2
New Registered Office Address:	3534 Silver Lace Ln. #42		1022 C
	Enter	r Florida street address	
	Boynton Beach	. Florida 3343	16 NS
	City	·	Zip-Code   1
v Registered Agent's Signature, if changing	Registered Agent:		å C

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree  $\overline{to}$  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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

## MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	<u>Type of Action</u>
MGR	Margine Silva	3534 Silver Lace Ln. #42	🗐 Add
		Boynton Beach FL 33436	Remove
			Change
AMBR	Maria Reyes	229 Trails End.	🗋 Add
		Greenactes FL 33413	🗆 Remove
AMBR	Kimberly Roney	1831 Augustine Rd	🗆 Add
		West Palm Beach FL 33411	
			Change
			🖸 Add
			🗆 Remove
			Change
			[]Add
			Remove
			🗆 Add
			[]Remove
			Change

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

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	<u> </u>			
e date, if other than th	10/20/20	22		•.

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	October 20th		2022	
		Margue	Silva	-
		(1		zed representative of a member

Margine Silva

Typed or printed name of signee