## L23000107273

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PICK-UP WAIT MAIL
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Cover Letter:

Confirmation may be sent to the following:

Mark H. Rosenbaum 1135 Covington Street Oviedo, FL 32765 (305) 725-3981

## **COVER LETTER**

TO:

Tallahassee, FL 32314

	Registration Sec Division of Corp			
SUBJEC		UNSHINE PRODUCTS LLC		
SUBJEC	CT:	Name of Lim	ited Liability Company	<del></del>
The encl	osed Articles of A	Amendment and fec(s) are sub	mitted for filing.	
Please re	turn all correspor	ndence concerning this matter	to the following:	
		MARK ROSENBAUM		
			Name of Person	
		K-WAVE SUNSHINE PR	ODUCTS LLC	
			Firm/Company	
			Address	
		OVIEDO FL 32765		
			City/State and Zip Code	<del></del>
		mark.rosenbaum@kwavesu	nshine.com to be used for future annual report notific	otion)
For furth	er information co	oncerning this matter, please co	-	atton)
MARK	ROSENBAUM		305 725-3981	
	Name of	Person		Telephone Number
Enclosed	l is a check for the	e following amount:		
<b>■ \$</b> 25.6	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)
	Mailing Address Registration S		Street Address: Registration Secti	ion
	Division of Co	orporations	Division of Corpo	orations
	P.O. Box 6323	1	The Centre of Tal	Hahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

K-WAVE SUNSHINE PRODUCTS LLC

company has been notified in writing of this change.

2024 DEC -4 AM 8: 16

(Name of the Limited Liabi	lity Company as it now appears of da Limited Liability Company)	on our records.)
(A FIORC	ia Limited Liability Company)	TALLAHASSEE FLORIDA
The Articles of Organization for this Limited Liability	Company were filed on $\frac{03/01}{1}$	and assigned
Florida document number L23000107273	·	
	<del>_</del>	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here	::
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered		ords, <u>enter the name of the new register</u>
agent and/or the new registered office address here:		
No con a Colonia De Cara a de A		
Name of New Registered Agent:		
New Registered Office Address:		
		a street address
		, Florida
		гір Соде
New Registered Agent's Signature, if changing Register	ed Agent:	
I hereby accept the appointment as registered agent		
provisions of all statutes relative to the proper and accept the obligations of my position as registered a		
being filed to merely reflect a change in the register		

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>	Address	Type of Action
AMBR	LESLIE MILLER-CROCCO	1135 COVINGTON ST	≣Add
		OVIEDO FL 32765	□Remove
			Change
			□Add
			Remove
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an effec lote: If	tive date is listed, Tthe date inserte	r than the date the date must be spi d in this block do te on the Departn	ecific and car	nnot be prior to the applica				filing.) Pu		
record	specifies a delay	ed effective date.	but not an	effective tin	ne, at 12:01	a.m. on the e	arlier of: (b	) The 9	0th day a	fter the
l is filed	OVEMBER 15			2024						
N	OVEMBER 15				_					
l is filed ated	WENDER 15	2				itative of a me				