123000119199

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A. RIVERS MAY 2 3 2023

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Tallahassee, FL 32314

TO: Registration So Division of Con			
REGIS 210	03 LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Ross Zalkind, Esq.		
		Name of Person	
	Rosenfield & Zalkind, P.L		
		Firm/Company	
	2323 Hollywood Blvd		
	***	Address	
	Hollywood, FL 33020		
	rzalkind@globalamericatitl	City/State and Zip Code e.com to be used for future annual report not	Hication)
For further information of	concerning this matter, please c	-	,
Ross Zalkind		954 620-1100	
Name o	of Person	at ()Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 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 Addre Registration Division of C	Section	Street Address: Registration Se Division of Co	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

REGIS 2103 LLC	
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co	ompany were filed on March 07, 2023 and assigned
Florida document number 1.23000119199	_•
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ted liability company here:
SUNNY 2103 LLC	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDR.	ESS)
	202
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
Training manress and bearing	
B. If amending the registered agent and/or registered	office address on our records, enter the name of the new registere
agent and/or the new registered office address here:	الم
	•
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.

DocuSign Envelope ID: 85BE9F79-0048-40C1-8CC4-058E0BCBBDAB in amending Authorized rerson(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
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
			Remove
			Change
			□Add
			Remove
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change

	——————————————————————————————————————
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fective date, if other than the date of filing:	
ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day a is filed.	after the
ted March 3/27/2023	
Daniel Bernstein	
Signature of a method of a member	

Filing Fee: \$25.00