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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ITAX GROUP, LLC
Account Number : I20140000115
Phone : (813)882-8426
Fax Number : (813)884-0263

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: SUNSHINEFLOORINGFL@GMAIL.COM

PET OF PN 3: 51

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TALLANDSEE. FLOAID

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUNSHINE FLOORING FLORIDA, LLC

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TO: Registration Se Division of Co			ł
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SUBJECT:	E FLOORING FLORIDA, LLO		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	, i
Please return all correspo	ondence concerning this matter	to the following:	:
	MADER, PRISCILLA		
	<del></del>	Name of Person	
	SUNSHINE FLOORING	FLORIDA, LLC	
		Firm/Company	
	11034 BLAINE TOP PLA	CE	
		Address	<u></u>
	TAMPA, FL 33626		
		City/State and Zip Code	
	SUNSHINEFLOORINGFL	-	!
F		to be used for future annual report noti	lication)
ror turther information (	concerning this matter, please c	BII:	
MADER, PRISCILLA		727 459-5264 at ()	
Name o	of Person	Area Code Daytim	e Telephone Number
			į
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fec	☐ \$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		Street Address:	
Registration		Registration Se	
Division of C		Division of Cor The Centre of T	
P.O. Box 632	[/ F1 22214		ananassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## DocuSign Envelope ID: C1E8A5DE-C22D-48EC-9D65-853885C63AE5 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

SUNSHINE FLOORING FLORIDA, LLO	1	
(Name of the Limited Lia (A Flo	billty Company as it now appears on our records.) order Limited Liability Company)	
The Articles of Organization for this Limited Liability Florida document number L23000219631	y Company were filed on 05/03/2023	and assigned
This amendment is submitted to amend the following	ŗ.	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and contain the words "I	Limited 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 AD	DRESS)	
	1	
Enter new mailing address, if applicable:		<del></del>
(Mailing address MAY BE A POST OFFICE BOX)		
	· ·	
B. If amending the registered agent and/or registe agent and/or the new registered office address her		name of the new registered
	:	•
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	!	,
<del></del>	, Florid	ia
New Registered Agent's Signature, if changing Registe	ered Agent;	-
I hereby accept the appointment as registered age provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	d complete performance of my duties, and t d agent as provided for in Chapter 605, F.S tered office address, I hereby confirm that t	l am familiar with and S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

Change

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II amenuing Authorized rerson(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

<u>Title</u>	Name	Address	Type of Action
MGR	ROGERIO J. DE OLIVEIRA	11034 BLAINE TOP PLACE	□Add
		TAMPA, FL 33626	■Remove
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		i	□Remove
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D. If an	nending an	y other informatio	on, enter change(s) here: (Attac	ch additional sheets, if necessary.)	
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F Effec	flva doto il	father then the do	to of filing:	(optional)	1
Note:	If the date	inserted in this block	specific and cannot be prior to date of does not meet the applicable status atment of State's records.	(optional) filing or more than 90 days after filing.) Pursuant to 6 tory filing requirements, this date will not be li	05.0207 (3)(b sted as the
				1	•
If the reco		a delayed effective de	ate, but not an effective time, at 12	:01 a.m. on the earlier of: (b) The 90th day af	icr the
Dated	DECEMBI	ER 8	2023		

Signature of a member or authorized representative of a member

Typed or printed name of signee

PRISCILLA MADER

Filing Fee: \$25.00

j