

L 23 000 245 22A

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

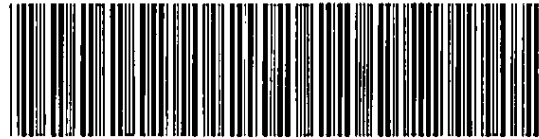
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07/13/23--0100101543 **25.00

2023 JUL 13 PM 2:16

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUNSET CAR SALES LLC

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:

ERKAN KAYA

Name of Person

18161 Portside St

Address

Tampa, FL 33647

City, State, and Zip Code

LLCSUNSETAUTOSALES@gmail.com

E-mail address, do not use for future communications

For further information concerning this matter, please call:

ERKAN KAYA

Name of Person

813, 309-8956

Street Phone

Home Phone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Center, Tallahassee
215 N. Van Buren Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

SUNSET CAR SALES LLC

(Name of the Limited Liability Company as it appears on our records.)

The Articles of Organization for this Limited Liability Company were filed on 07/13/2023 and assigned
Florida document number L23000245224.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "limited liability company" or "LLC" or the abbreviation "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:

New Registered Office Address:

Florida

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in that capacity. I further agree to comply with the provisions of all statutes relative to the proper filing of this document, and I am familiar with and accept the obligations of my position as registered agent as provided for in Section 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I agree that the limited liability company has been notified in writing of this change.

Printed Name of

Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

[illegible]

Note: If the date inserted in this block does not meet a applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State website.

Dated 07/13/2023

July 7

Erkan KAYA