1/29/24, 2:44 PM

# Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000039504 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

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

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SUNNY SIDE DEBT SOLUTIONS LLC

Certificate of Status	()
Certified Copy	1
Page Count	06
Estimated Charge	\$55,00



Electronic Filing Menu — Corporate Filing Menu

T. LENNEUX JAN 31 2024 Registration Section

TO:

### **COVER LETTER**

Division of Co	yporations			
	SIDE DEBT SOLUTIONS LLC			
SUBJECT:				
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Cheyenne Moseley			
		Name of Person	<del></del>	
	Legalzoom.com, Inc.			
	Firm/Company			
	101 N Brand Blvd 11th Fl			
	Address			
	Glendale, CA 91203			
	City/State and Zip Code			
	m.jessier@gmail.com			
	E-mail address: (t	to be used for future annual repor	t notification)	
For further information	concerning this matter, please ea	all:		
Cheyenne Moseley		800 773-088	88	
Name	of Person	at ()	aytime Telephone Number	
Enclosed is a check for	the following amount:			
	☐ \$30.00 Filing Fee & Certificate of Status	■ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	Certificate of Status &	
MAII	LING ADDRESS:	STREET/CO	URIER ADDRESS:	

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

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

. Page; 04 of 11

To:

2024-01-29 16:18:50 PST

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNNY SIDE DEBT SOLUTIONS I	LLC	
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L23000404430		and assigned
This amendment is submitted to amend the follow		
	•	
A. If amending name, enter the new name of the	ne umitea nability company nere:	
Sunny Side Financial LLC		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	de:	Appendicular on a series when many to compay remains 18 miles at \$1.
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	7 <i>X</i> )	
		37. 28
P. If amonding the varietaved agent and/or	registered office address on our records, ente	r the name of the ne
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our recurds, <u>ente</u>	r the name of the ne
	Star Kill 1 to be an agreem	30
N SN D C LA		-5-2 O
Name of New Registered Agent:		<del>-                                      </del>
New Registered Office Address:		<u>ν</u> Σ
	Enter Florida street address	<b>57</b>
	, 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.

If Changing Registered Agent, Signature of New Registered Agent

To: . Page: 05 of 11 2024-01-29 16:18 50 PST 13236068205 From; Rajiv Srivastava

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
<del></del>			□ Add
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			Add
			☐ Remove
			☐ Change
			□ Remove
			□ Change
			□ Add
			□ Remove
			☐ Change

To:

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Filing Fee: \$25.00