

L24 000 381 420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

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SECRETARY OF STATE
TALLAHASSEE, FL

TO: Registration Section
Division of Corporations

SUNSHINY RENTALS LLC

SUBJECT: _____
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:

PAULA QUIJANO

Name of Person

SUNSHINY RENTALS LLC

Firm/Company

33560 CASTAWAY LOOP

Address

WESLEY CHAPEL, FLORIDA, 33543

City/State and Zip Code

EDWINT75@HOTMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUAN ESTEBAN ALVAREZ

Name of Person

at (407) 7472147

Area Code

Daytime Telephone 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 Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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2024 DEC -9 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FL

TO
ARTICLES OF ORGANIZATION
OF

SUNSHINY RENTALS LLC

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

The Articles of Organization for this Limited Liability Company were filed on 08/30/2024 and assigned
Florida document number L24000381420

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," the designation "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:

JUAN ESTEBAN ALVAREZ

New Registered Office Address:

33560 CASTAWAY LOOP

Enter Florida street address

WESLEY CHAPEL

City

Florida 33543

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

removed from our records:

GR = Manager
MBR = Authorized Member

| tit | Name | Address | Type of Action |
|-----|----------------------|---|--|
| IGR | PAULA QUIJANO | 33947 ASTORIA CIR WESLY CHAPEL, FLORIDA | <input type="checkbox"/> Add |
| | | 33545 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGR | JUAN ESTEBAN ALVAREZ | 33560 CASTAWAY LOOP WESLEY CHAPEL | <input checked="" type="checkbox"/> Add |
| | | FLORIDA 33543 | <input type="checkbox"/> Remove |
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TALLAHASSEE, FL
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If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

WE ARE CHANGIN DE REGISTERED AGENT AND MANAGER PAULA QUIJANO BY

JUAN ESTABAN ALVAREZ

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SECRETARY OF STATE
TALLAHASSEE, FL

Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the cord is filed.

Dated 12/06, 2024

Paula Quijano
Signature of a member or authorized representative of a member

PAULA QUIJANO

Typed or printed name of signee

Filing Fee: \$25.00