

1724000003199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

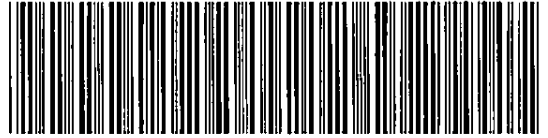
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

not registered opt

Office Use Only



000423320230

02/20/24--01014--012 **25.00

FILED
2024 FEB 22 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FL

MAR 14 2024

D CUSHING

TSLG

The Sayre Law Group

GROVER C. SAYRE, III
(612) 455-5015
gsayre@tslgllaw.com
Also admitted in Iowa
Also admitted in Wisconsin

February 9, 2024

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

Re: Amendment to Application by Foreign LLC for Authorization
to Transact Business in Florida
Applicant: Sunset 802 LLC

Ladies and Gentlemen:

Enclosed for processing please find:

1. Cover Letter to Registration Section - Division of Corporations;
2. Amendment to Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida; and
3. Check in the amount of \$25 for payment of the fee.

FILED
2024 FEB 22 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FL

Please return the filed documents at your earliest convenience. Thank you very much and contact our office if you have any questions.

Very truly yours,

SAYRE LAW GROUP PLLC

By 

Grover C. Sayre, III
Attorney/Shareholder

GCS/ljl
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunset 802 LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Grover C. Sayre, III
Name of Person
The Sayre Law Group
Firm/Company
3900 Northwoods Drive, Suite 3900
Address
Arden Hills, Minnesota 55112
City/State and Zip Code

brian@mulcahynickolaus.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Grover C. Sayre, III at (612) 455-5015
Name of Person Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

- \$25 Filing Fee \$30 Filing Fee & Certificate of Status \$55 Filing Fee & Certified Copy \$60 Filing Fee, Certificate of Status & Certified Copy

2024 FEB 22 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FL
FILED

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: Sunset 802 LLC

Enter new principal office 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)**

2. The Florida document number of this limited liability company is: 32400000

3. Jurisdiction of its organization: Minnesota

4. Date authorized to do business in Florida: 02/21/2024

2024 FEB 22 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer 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: _____

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.

If Changing Registered Agent. Signature of New Registered Agent

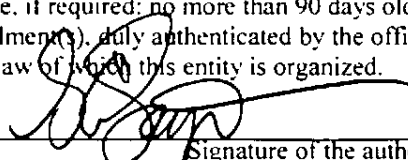
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

See below and see attached

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Member	Gary T. Mulcahy, Jr.	9200 10th St N, Lake Elmo, MN 55042	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
Manager	Brian H. Mulcahy	9200 10th St N, Lake Elmo, MN 55042	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
Member	Michelle Mulcahy	9200 10th St N, Lake Elmo, MN 55042	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
Manager	Heather M. Wendorf	9200 10th St N, Lake Elmo, MN 55042	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
Member	Heather M. Wendorf	9200 10th St N, Lake Elmo, MN 55042	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



 Signature of the authorized representative

Grover C. Sayre, III

 Typed or printed name of signee

Filing Fee: \$25.00

**ATTACHMENT TO
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

Sunset 802 LLC

Paragraph 8, continued:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Member</u>	<u>Toby Wendorf</u>	<u>9200 10th St N, Lake Elmo, MN 55402</u>	<u>ADD</u>