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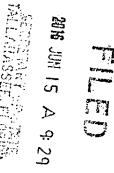
(Red	questor's Name)		
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PICK-UP	☐ WAIT	MAIL	
(Bu:	siness Entity Na	me)	
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Certified Copies	_ Certificate	es of Status	
Special Instructions to Filing Officer:			





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	SUNSHINE ASSOCIA	ATION, INC			
	000004311				
				-	_
The enclosed Articles of Amenda	nent and fee are submi	tted for filing.			
Please return all correspondence	concerning this matter	to the following:			
REINALDO CASTELLANOS, I	ESQ				
	(1	Name of Contact Pe	rson)		
REINALDO CASTELLANOS,	P.A.				
	•	(Firm/ Company)		
9960 BIRD ROAD					
		(Address)			
MIAMI FLORIDA 33165					
	(0	City/ State and Zip (Code)		
REY@CASTELLANOSLAW.C	ЮМ				
E-mai	address: (to be used for	or future annual rep	ort notification)	
For further information concernir	ig this matter, please ca	all:			
REINALDO CASTELLANOS		at	305	223-8744	
(Nar	me of Contact Person)			(Daytime Telephone Number)	
Enclosed is a check for the follow	ving amount made paya	able to the Florida I	Department of S	State:	
	\$43.75 Filing Fee & C Certificate of Status	3\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi s Certifi	O Filing Fee icate of Status led Copy tional Copy is essed)	
Mailing Addr	ess	<u>Str</u>	eet Address		

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

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

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as	currently filed with the Florid	la Dant of State)
\ <u> </u>	currently theu with the Florid	ia Dept. Of State)
N00000004311	Number of Companion (if Iran	
(Document	Number of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the con	rporation:	
		The new
name must be distinguishable and contain the word "co Company" or "Co." may not be used in the name.	orporation" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADD</u>	<u>RESS</u>)	
	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	
		•
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		enter the name of the
	7111CL BOULT 6331	
Name of New Registered Agent:		
	(FI	
New Registered Office Address:	(Flor	rida street address)
		Planida
	(City)	, Florida (Zip Code)
		•
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.	i <mark>stered Agent:</mark> I am familiar with and accent ti	he obligations of the position.
		;:-1
	Signature of New Registe	red Agent, if changing
		in the second second
	Page 1 of 4	
		9,4 0
		三台 2

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name	e, and
address of each Officer and/or Director being added:	•

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John I V Mike SV Sally	<u>Jones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TD	FUENTES, ODALIS	21 E. 3 STREET # 305
X Add			HIALEAH, FL, 33010
Remove			
2) Change	SD	SANTANA, LISBET	21 E. 3 STREET # 210
X Add			HIALEAH, FL, 33010
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or addi attach additional she	eets, if necessary).	(Be specific)	nge(s) nere.				
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The date of each amendment(s) adoption date this document was signed.	on:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Department.	oes not meet the applicable statutory filing requirements, this date will nent of State's records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	
There are no members or members of adopted by the board of directors. Dated 6.13.16	entitled to vote on the amendment(s). The amendment(s) was/were	
Sianatura		· · · · · · · · · · · · · · · · · · ·
Signature(By the chairman	or vice chairman of the board, president or other officer-if directors	
	lected, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
	LEONEL PEREZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	