

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ity/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
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10/18/18--01040--013 **25.00

11/16/18--01018--027 **10.00

And

R. WHITE NOV 26003 SECREIST OF STATE TALLATIASSEE, FI





October 26, 2018

DANIELLE HAMILL 3136 DENHAM CT ORLANDO, FL 32825

SUBJECT: SUNDAY SCENES INCORPORATED

Ref. Number: N18000009280

We have received your document for SUNDAY SCENES INCORPORATED and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 518A00022105

Rebekah White Regulatory Specialist II

<u>6</u>

SECRETARY OF STATE TALLARASSES, FL

www.sunbiz.org

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: NAME OF CORPORATION:	enes, Inc	
DOCUMENT NUMBER: <u>N180000</u> 92	-80	
The enclosed Articles of Amendment and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	to the following:	
Ocimicik Hamill		
(Name of Contact Person)	
Sunday Sienes, Inc.		
	(Firm/ Company)	
2		
Bizu Danham Ct.		
	(Address)	
Out - 15 PA 27975		
Orlando, FL 32825	City/ State and Zip Code)	
•		
6 info esondayscenes.	com	
E-mail address: (to be used	for future annual report notification)	
For further information concerning this matter, please c	rall:	
·		
Danielle Hamill	at (Area Code) (Daytime Telephon	
(Name of Contact Person)	(Area Code) (Daytime Telephon	e Number)
Enclosed is a check for the following amount made pay	able to the Florida Department of State:	
The losted is the recent for the torrowing annount made pay		
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐		
Certificate of Status	Certified Copy Certificate of Status	
	(Additional copy is Certified Copy enclosed) (Additional Copy is	
	Enclosed)	
N. T. Alban	Samona Addamir	
<u>Mailing Address</u> Amendment Section	Street Address Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to ... Articles of Incorporation of

FILED

2018 NOV 16 PH 12: 02

Sunday Scenes Inc.		THE GE
Sunday Scenes Inc. (Name of Corporation as	currently filed with the Flor	ida Dept? of State) shi Y OF STATE
M1800000 9Z8		TALLAHASSEE, FL
	nt Number of Corporation (if k	nown)
	,	
Pursuant to the provisions of section 617,1006, Floridament(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the followin
A. If amending name, enter the new name of the co	orporation:	
		The nev
name must be distinguishable and contain the word "("Company" or "Co." may not be used in the name	corporation" or "incorporated	l" or the abbreviation "Corp," or "Inc."
B. <u>Enter new principal office address,</u> if applicable (Principal office address <u>MUST BE A STREET ADI</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	1V:	
Studing data ess Sast B. A 1 QSI OFFICE BO		
	<u></u>	
	 	
D. If amending the registered agent and/or registe new registered agent and/or the new registered		enter the name of the
Name of New Registered Agent:		
_		arıda street address)
New Registered Office Address:	,,,	,
		Florida
_	(Ciţy)	Florida (Zip Code)
New Registered Agent's Signature, if changing Res		
hereby accept the appointment as registered agent.	I am familiar with and accept	the obligations of the position.
	Signature of New Regist	tered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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: \underline{X} Change \underline{X} Remove \underline{X} Add	V Mil	n Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add Remove	DIR	Ermir Boikroci	3721 Knayyam Ave #4 Orlando, FL 32826
2)	DIR	Mikhail Howell	West Perm Basch, FL 33-415
3) <u>*</u> Change Add Remove	DIR	Rachael Mumpson	Apopau, FL 32703
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

F. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary) (Be specific)

Por IRS request we would like our organizing document to include me following valement: "Solid organization is organized exclusively for charitable, religious, educational, and scientific purposes including for our purposar, me making of durination to organizations that qualify as exempt organizations described under Section 501 (1) (3) of the internal Devenue Cate, or corresponding section of any future fedoral tax code. upon dissolution of the organization, assets shall be distributed for one or more exempt purposed within me meaning of Section 501 (c)(3) of the Internal Revenue code, or corresponding section of any future federal tax code or small be distributed to the fectoral opvernment, or to as a state or local government, for & public purpose Any such assets not disposed shall be disposed of by a court of competent unisdiction in the country in which the principal office of the boated, exclusively for such ardanisation is then or to such organizations ou sould court nall determine, which are organized and operated oxclusively for such purposes.

The date of each amendment(s) adoption:	_, il other than
date this document was signed.	
Effective date if applicable:	<u> </u>
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated 11/03/18	
Signature Janiell Hamil	_
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Danielle Hamill	
(Typed or printed name of person signing)	
Director of operations (Title of person signing)	
(Title of person signing)	