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PICK-UP	☐ WAIT	MAIL		
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COVER LETTER

TO: Amendment Section

Division of Corporations

•			
NAME OF CORPORATION:	WSHINE	FINANCIAL	Curp.
DOCUMENT NUMBER: P03	000023	767	
The enclosed Articles of Amendment and f	fee are submitted f	or filing.	
Please return all correspondence concerning	g this matter to the	e following:	
ARCHNA (N	MULVEN WA	1)	
SUNCHINE	FIWAW CIAL (Firm/ Company)	Conp.	
4501 Ro	YAL PALM (Address)	Ave	
MIAMI B	FAUL FL ity/ State and Zip Cod	33140	
For further information concerning this ma	tter, please call:		
DANIEL MULVENIUM— (Name of Contact Person)	at (78	96) 218 3 rea Code & Daytime Tele	759 ephone Number)
Enclosed is a check for the following amou	ınt:		
\$43.75 Filing Fee & Certificate of Status	Certifie	Filing Fee & od Copy onal copy is sed)	□ \$52.50 Filing Fee Certificate of Statu Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division Clifton E	nent Section of Corporations	

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 25, 2008

Archna Mulvenna Sunshine Financial Corp. 4501 Royal Palm Ave. Miami Beach, FL 33140

SUBJECT: SUNSHINE FINANCIAL CORP.

Ref. Number: P03000023967

We have received your document for SUNSHINE FINANCIAL CORP. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 608A00038363

SECRETARY OF STATES. FLORIDA

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MECEINEL

Articles of Amendment to Articles of Incorporation of

FILED
2008 JUL 10 AM 10: 23
SEGRETARY

	Name of corporation as curren	FINANCIAL	TALL AMASSES FOR STATE
	(Name of corporation as currer	ntly filed with the Florida I	Dept. of State)
	P03000	023967	
		er of corporation (if known	
Purcuant to the provie	ions of section 607 1006	Florida Statutes this I	Florida Profit Corporation
•	amendment(s) to its Article		toriuu Proju Corporation
NEW CORPORATE	E NAME (if changing):		
N COM OMIL	7 TYZZYZZ (II CHANGING)		
			ation "Corp.," "Inc.," or "Co.") lation," or the abbreviation "P.A.")
) Indicate Article Number(s)
and/or Article Title(s)	being amended, added or	deleted: (BE SPECIF	<u>IC</u>)
ARTICLE VI	T - INITIAL R	egistered Age	ent - Amennenco
		· ·	ROTAL PALM AVE.
	UI FL 33,40		
ARTICLE VII	I · INITIAL E	BOARD OF DIREC	toes - change
"The mame	es of the D	rectors of	the Corporation
			! MULVENWA
			Mulveman
	TREASUREZ ".	DANIA 1	Morrewat
	Scenehung:	David 1	. Museure
	(Attach additi	ional pages if necessary)	
-	•		on of issued shares, provisions tself: (if not applicable, indicate N/A
	NA		

(continued)

The date of each amendment(s) adoption:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
ARCHNA MULVENNU
(Typed or printed name of person signing)
President
(Title of person signing)
I hereby AM familian will AND Accept the
Duties AND Responsibilities AS Registered Agent for Systine Linance FILING FEE: \$35
Daniel J. Mulvewart