04000086251

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone #	,
	☐ WAIT	
(Busi	ness Entity Name)	
(Doct	ument Number)	
Certified Copies	Certificates of	f Status
Special Instructions to Fi	ling Officer:	
Certified Copies	Certificates of	Status

Office Use Only



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09/14/05--01042--004 **35.00



J. BRYAN NOV 1 4 2006



September 18, 2006

ELENITA B. DIGENNARO SUNSET COVE PROPERTY INVESTMENTS, LLC 680 NE MARINE DRIVE BOCA RATON, FL 33431

SUBJECT: SUNSET COVE PROPERTY INVESTMENTS, LLC

Ref. Number: L04000086251

We have received your document for SUNSET COVE PROPERTY INVESTMENTS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Letter Number: 906A00055758

Joey Bryan Document Specialist November 7, 2006

Florida Department of State Division of Corporations Corporate Records PO Box 6327 Tallahassee, Florida 32314

Re: Sunset Cove Property Investments, LLC Document # L04000086251

I would like to request a refund of \$10.00. We used the incorrect form the first time we submitted the change and sent in \$35.00 instead of the required \$25.00

Please send refund to:

Sunset Cove Property Investments, LLC 680 NE Marine Drive Boca Raton, Florida 33431

Thank you very much.

Sincerely,

Fruita B. DiGennaro, Member

COVER LETTER

TO: Registration Section Division of Corporations		•	
•			
SUBJECT: SUNSET COVE PROPERTY	INVESTMENTS, LI	<u>C</u> .	
(Name of	Limited Liability Co	ompany)	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered (Office Change and f	ee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the fo	ollowing:	
Elenita B. DiGennaro (Name of Person)		and the second second	
(Name of Person)			
SUNSET COVE PROPERTY INVESTMENT	יכ זור		
(Firm/Company)			
(90 NE Marriana Brains	1		
680 NE Marine Drive (Address)		•	
Boca Raton, F1. 33431			
(City/State and Zip Code)			
For further information concerning this matt	er nlease call:		
1 of farmer militation concerning and man	or, proude duri.		
Plantus P. Difference	. Z EZ1 . 13	393–1918	
Elenita B. DiGennaro (Name of Person)	_ "' (Code & Daytime Telephone Number)	
(Ivanie of Folson)	(1 II ca	Code & Dayante retephone (uniter)	
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahasse	ee, Florida 32314	
	•		
Enclosed is a check for the following	ng amount:		
\$25 Filing Fee	S55 Fili	ng Fee & Certified Copy	

INHS18 (8/05)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	-		
1. The name of the limited	d liability company is:	Sunset Cove Propety Investments, LLC	
2. The mailing address of	the limited liability of	ompany is : 680 NE Marine Drive	·
Boca Raton, FL 33431			
11/30/2004		L04000086251	
3. Date of filing/registrati	on in Florida	4. Document number	· —
o. Date of many regional	on in I torrau	4. Document named	
5. The name of the register Florida Department of S	red agent and the registate:	stered office address as shown on the records of the	ne
-	Anthony J. Reita	no	
		Name	Ĭ
	3200 N Federal Hi		
		Address	
	Boca Raton, FL 33		2.4
	•	State and Zip	
6. The name and address of	f the new registered a	gent and/or office:	
	Elenita B. DiGenn	aro	
•		Name	,
	680 NE Marine Driv	ve	
	Florida street address	s (P.O. Box NOT acceptable)	
	Boca Raton	FL 33431	
	City, S	State and Zip	
confirmed that after the ch and the business office of a liability company, it is here of the members of the lim or the operating agreement	ange or changes are me the registered agent we confirmed that the ited liability company of the limited liability.	under the laws of the State of Florida, it is hereby hade, the Florida street address of the registered of ill be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative or as otherwise provided in the articles of organizy company.	ffice d vote
Signature of a member or authoriz	ed representative of a member	er)	
(,	
Elenita B. DiGennaro	Member		
(Printed or typed name of signee)	_		
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm to the confirmation to the confirm	stment as registered a of all statutes relative accept the obligation is document is being j hat the limited liabili	gent and agree to act in this capacity. I further a e to the proper and complete performance of my a is of my position as registered agent as provided f filed to merely reflect a change in the registered o ty company has been notified in writing of this ch	ree to uties, or in ffice inge.
Signature of Registered Agent)	man		÷
InPromote of McRisterest WREIII)			

Division of Corporations', P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00