

LOS000097148

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

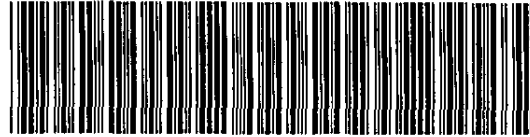
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100247329421

05/02/13--01032--017 \*\*25.00

FILED

2013 MAY -2 AM 11:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Culligan MAY -3 2013

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Shining Light Investments, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Geoffrey Randall, Esq.

Name of Person

Corporation Company of Miami

Firm/Company

201 S. Biscayne Blvd, Ste. 1500

Address

Miami, FL 33131

City/State and Zip Code

grandall@shutts.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Geoffrey Randall at ( 305 ) 379-9142

Name of Person

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

## 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. Name of the limited liability company: Shining Light Investments, LLC

2. (a) Principal office address of limited liability company: Tomas Arturo Regalado  
(Note: MUST BE STREET ADDRESS)  
2627 S. Bayshore Drive, Apt. 1802  
Miami, FL 33133

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
Tomas Arturo Regalado  
100 S.E. 2nd Street, Suite 1600  
Miami, FL 33131

9/30/05

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State.

Registered Agent:

F&L Corp.

Registered Office Address:

One Independent Drive, Suite 1300  
Jacksonville, FL 32202

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

Corporation Company of Miami

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

201 S. Biscayne Boulevard

Suite 1500

Miami, FL 33131

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Tomas Arturo Regalado  
Signature of a member or authorized representative of a member

Tomas Arturo Regalado  
Printed or typed name of signer

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 608, 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.

Tomas Arturo Regalado  
Signature of Registered Agent

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

FILING FEE: \$25.00