From: Kim Weidenbach

Tuesday, July 28, 2009 4:20 PM Page: 1 of 2

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## Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (8

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From:

Account Name : CORPDIRECT AGENTS, INC.

Account Number : 110450000714 Phone : (850)222-1173 Fax Number : (850)224-1640

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## REGISTERED AGENT CHANGE

NEW SUN FOUNDATION, INC.

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To: FL Dept of State Subject: 000409.108000

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

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Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: NEW SUN FOUNDATION, INC.
2. The principal office address: Calle Cartagena N 73 - 1 Izquierda
Murcia, Spain 30002
3. The mailing address (if different):
4. Date of incorporation/qualification: June 19, 2007 Document number: N07000006102
<ol><li>The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)</li></ol>
Jones Foster Service, LLC
505 South Flagler Drive, Suite 1100
West Palm Beach, Florida 33401
6. The name and street address of the new registered agent (if changed) and /or registered office  (if changed):
CorpDirect Agents, Inc.
515 East Park Avenue
P.O. Box NOT acceptable Only
Tallahassee, Florida 32301
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Francisco Legaz Cervantes, President Signalis of An officer or director Privated of typed name and title
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent 07/28/09
If signing on behalf of an entity:
Michele Holden, Assistant Sect Typed of Printed Name
* * * FILING FBE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)