F9900001136

Sunset Ranches, Inc
498 Palm Springs Drive
Suite 100
Altamonte Springs, FL 32701

City/State/Zip

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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1(Corpora	ation Name)	(Document #)		
2.			4000048500645- _n1/31/0201026005	
(Corporation Name)		(Document #)	*****35.00 *****35.00	
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☐ Walk in	Pick up time	·	Certified Expy S	
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NEW FILINGS Profit Not for Profit Limited Liability Domestication		Dissolution/Witho		
Other		☐ Merger		
OTHER FILINGS		REGISTRATION/Q	<u>UALIFICATION</u>	
Annual Report Fictitious Name		Foreign Limited Partnersh Reinstatement Trademark Other	ip 2-	
			Everniner's Initials	

CR2E031(7/97)

T BROWN FEB - 4 2002

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

rubmits the fo he State of Fl	following statement in order to change its registered office or registered agent, or both, in	
=	of the corporation: Sunset Ranches, Inc.	
	Sunset Ranches, Inc.	-
The mailing	ng address of the corporation: 498 Palm Springs Drive Suite 100	-
	- Altamonte Springs, Florida 32701	- •
. Date of inc	corporation/qualification: 03/01/1999 Document number: F9900001136	
. The name a	and address of the current registered agent and office:	
	Jack W. Giac Mone	
	9400 S. Dadeland Blvd Suite 605	
. The name a	and address of the current registered agent and office:	
	498 Palm Springs Drive Suite 100	
	Altamonte Springs, Florida 32701	
	dress of its registered office and the street address of the business office of its registered nged, will be identical.	
uch change v uthorized by	was authorized by resolution duly adopted by its board of directors or by an officer so y the board.	
//M	1-22-02	
Signature	ire of an officer, chairman or vice chairman of the board) (Date)	
// Jack-V	W. Ciacalone Vice President (Printed or typed name and ntle)	
aving been n Orporation, I further agree erformance o egistered of d	named as registered agent and to accept service of process for the above stated I hereby accept the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete of my duties, and I and familiar with and accept the obligation of my position as of the complete of the control of	
	1-22-02	
//	(Signature of Registered Agent) half of an entity: Se T Banches INC Vice Mesi Peri	전
# 7 MM ~ /		

* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314