

FILED

2003 JUN 10 PM 8:55

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L00000009815			
1. Entity Name SUNSHINE INVESTMENTS OF FLORIDA, L.L.C.			
Principal Place of Business 18307 SW 4TH STREET PEMBROKE PINES, FL 33029-4305		Mailing Address 18307 SW 4TH STREET PEMBROKE PINES, FL 33029-4305	
2. Principal Place of Business 19410 NW 5TH STREET		3. Mailing Address 19410 NW 5TH STREET	
City & State PEMBROKE PINES, FL		City & State PEMBROKE PINES, FL	
Zip 33029 Country USA		Zip 33029 Country USA	
6. Name and Address of Current Registered Agent TORRES, JENNY P 18307 SW 4TH STREET PEMBROKE PINES, FL 33029-4305		7. Name and Address of New Registered Agent Name HUMBERTO MURIEL Street Address (P.O. Box Number is Not Acceptable) 19410 NW 5TH STREET City PEMBROKE PINES FL Zip Code 33029	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>[Signature]</i> DATE 06/05/03 (NOTE: Registered Agent's signature required when submitting)			
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 17, 2003			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TORRES, JENNY P 18307 SW 4TH ST PEMBROKE PINES, FL 33029 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MURIEL, HUMBERTO 18307 SW 4TH ST PEMBROKE PINES, FL 33029 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
700020759207 06/10/03--01066--001 **\$50.00 MGRM TRUJILLO, ALIX 19410 NW 5TH STREET PEMBROKE PINES, FL 33029			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 806, Florida Statutes. SIGNATURE: <i>[Signature]</i> HUMBERTO MURIEL 06/05/03 954-260-0336 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			

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