0007183 City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (SEE

DOCUM	IEMI MUMDER(S), (II KNOWN):
1. SUN ATLANTIC PRO (Corporation Name)	MEATIES, LLC (Document #)
2. LO 1-7183	
(Corporation Name)	(Document #)
3. (Corporation Name)	500080831659 -09/27/0201071001 (Document#) ******25.00 ******25.00
(esperanon rumo)	(Document #)
4.	
(Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy
☐ Mail out ☐ Will wait	Photocopy
NEW FILINGS	AMENDMENTS 27 FI
Profit Not for Profit	Amandmant SSE
Limited Liability	Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal
Domestication Other	Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
	

CR2E031(7/97)

Examiner's Initials

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 liability company submits the following statement in order to change its registered office or reagent, or both, in the State of Florida.	limited gistered
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1. The name of the limited liability company is: Sun Atlantic Properties, LLC
2. The mailing address of the limited liability company is: 110 East Atlantic Ave.,
Suite 325, Delray Beach, FL 33444
5/8/01 L01000007183
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Anthony Depierro
Name
110 East Atlantic Avenue, Ste. 325
Address
Delray Beach, FL 33444 City State and 7in
exy, state the 2xp
6. The name and address of the new registered agent and/or office:
PATRICIA_LEBOW, P.A.
Name 1 North Clematis Street, Suite 500
Florida street address (P.O. Box NOT acceptable)
West Palm Beach FL 33401
City, State and Zip
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 of the operating agreement of the limited liability company.
as as
John Depierro, Managing Member (Printed or typed name of signee)
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, PS. On, 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. (Signature of Registered Agent)
Patricia Lebow, President Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)