

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000026512

**FILED**  
**Apr 04, 2010**  
**Secretary of State**

**Entity Name:** SUNSET KEY PROPERTIES, LLC

**Current Principal Place of Business:**

PMB 450, 445 SL 13, # 26  
JACKSONVILLE, FL 32259

**New Principal Place of Business:**

450 STATE RD 13 N  
106  
SAINT JOHNS, FL 32259

**Current Mailing Address:**

PMB 450, 445 SL 13, # 26  
JACKSONVILLE, FL 32259

**New Mailing Address:**

450 STATE RD 13 N  
106  
SAINT JOHNS, FL 32259

**FEI Number:** 45-0518756      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

JIMENEZ, MARCIA  
PMB 450, 445 SL 13, # 26  
JACKSONVILLE, FL 32259      US

**Name and Address of New Registered Agent:**

JIMENEZ, MARCIA  
450 STATE RD 13 N  
106  
SAINT JOHNS, FL 32259      US

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.

SIGNATURE: MARCIA JIMENEZ

04/04/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MNGR  
Name: JIMENEZ, MARCIA  
Address: 450 STATE RD 13 N, SUITE 106  
City-St-Zip: SAINT JOHNS, FL 32259

Title: MNGR  
Name: JIMENEZ, MAURICIO  
Address: 450 STATE RD 13 N, SUITE 106  
City-St-Zip: SAINT JOHNS, FL 32259

I hereby certify that the information indicated on this report is true and accurate and that my electronic 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 608, Florida Statutes.

SIGNATURE: MARCIA JIMENEZ

MNGR

04/04/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date