

L04000025931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

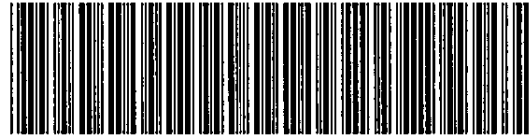
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2013 JUN 12 AM 8:20  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

J. SAULSBERRY  
EXAMINER  
JUN 13 2013

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SUNSHINE INCOME PROPERTIES, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Denise Fowler

Name of Person

Registered Agents Legal Services

Firm/Company

1220 N Market Street, #806

Address

Wilmington, DE 19801

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Denise Fowler

800

400-6650

at (            )

Name of Person

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

FILED  
2013 JUN 12 AM 8:20  
TALLAHASSEE, FLORIDA  
STATE  
ATTORNEY GENERAL

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

2. (a) Principal office address of limited liability company: 5 Via Encanto  
 (Note: **MUST BE STREET ADDRESS**) Santa Barbara, CA 93108

- INHS18 605/08Y