(R	Requestor's Name)		
	ddress)		
(A	addiess)		
(A	ddress) ··		
(C	city/State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
(B	Jusiness Entity Name	9)	
(D	Occument Number)		
Certified Copies	Certificates o	of Status	
Special Instructions to	o Filing Officer:		
A. LUNT			
NOV 14 2008			
EXAMINER			

Office Use Only

400137578084

11/12/08--01012--022 **50.00

COVER LETTER

TO: Registration Section Division of Corporations ADDRESS
SUBJECT: SUN SERI II LLC CHENICE (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:
BRION SUNSER! (Name of Person) SUNSER! TI LLC (Firm/Company)
3911 Golf Park Loop UNIT 103
3911 Golf Park Loop Unit 103 (Address) Spanewron FL 34203 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)
ethert/country andress. Malling andress.

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

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 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	4 4 -
1. Name of the limited liability company:SU	wsern II LLC
2. (a) Principal office address of limited liability compan (<i>Note: MUST BE STREET ADDRESS</i>)	BRADENSON, PL 34202
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAME AS ABOVE
5/28/2004 3. Date of filing/registration in Florida	LO4 6000 40 888 4. Document number
5. (a) Registered Agent and Registered Office shown on	4. Document number the records of the Florida Dept. of Ships
Registered Agent:	DRION SUNSATION
Registered Office Address:	10515 CHEVAL PEASE 3
•	BRADENTOL, PL 34202
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	Brion Sunseci
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	BRADENTON ,FL 34203
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the charge confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles climited liability company.	et address of the registered office and the business case of a Florida limited liability company, it is
(Signature of a member or authorized representative of a member)	_
Printed or typed name of signce) Conserved (Printed or typed name of signce)	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notifie	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I i as registered agent as provided for in Chapter 608, change in the registered office address, I hereby and in writing of this change.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00