

**L04000074138**

DAVID RODRIGUEZ  
1301 PONCE DE LEON  
CORAL GABLES, FL 33134

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

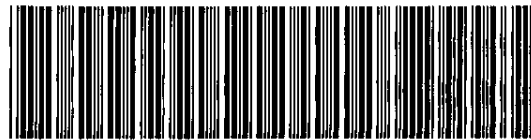
(Business Entity Name)

(Document Number)

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2011 DEC 27 AM 10:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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C. LEWIS  
DEC 29 2011  
EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 14, 2011

DAVID RODRIGUEZ  
1301 PONCE DE LEON  
CORAL GABLES, FL 33134

SUBJECT: SUNSET DRIVE PROPERTY, LLC  
Ref. Number: L04000074138

We have received your document for SUNSET DRIVE PROPERTY, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

If you have any further questions concerning your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 411A00027879

**COVER LETTER**

O: Registration Section  
Division of Corporations

SUBJECT: Sunset Drive Property 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:

DAVID RODRIGUEZ  
Name of Person

SUNSET DRIVE PROPERTY LLC  
Firm/Company

1301 POULCE DE LEON BLVD  
Address

CORAL GABLES, FL 33134  
City/State and Zip Code

DAVID M D I @ AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAGALY RODRIGUEZ at (305) 670 0260  
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

**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.

1. Name of the limited liability company: Sunset Drive Property, LLC

2. (a) Principal office address of limited liability company:

12330 SW 53 ST  
SUITE 711

(Note: **MUST BE STREET ADDRESS**)

COOPER CITY FL 33330

(b) Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

10/08/2004

3. Date of filing/registration in Florida

4. Document number

L04000074138

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Agent:

LATREA - ONTEGA

Registered Office Address:

150 ALHAMBRA CIRCLE  
SUITE 950

CORAL GABLES FL 33134 US

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:**

DAVID RODRIGUEZ

**NEW Registered Office Address:**

(**MUST BE FLORIDA STREET ADDRESS**)

1301 PONCE DE LEON BLVD  
CORAL GABLES  
CORAL GABLES, FL 33134

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 or the operating agreement of the limited liability company.

David Rodriguez  
Signature of a member or authorized representative of a member

DAVID RODRIGUEZ  
Printed or typed name of signer

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, F.S. Or, 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.

(Same)  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00