

L04000088553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

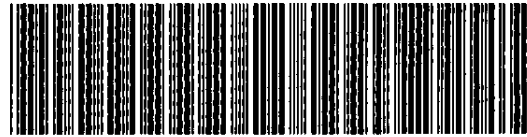
(Business Entity Name)

(Document Number)

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11 SEP 23 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan SEP 23 2011



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 9, 2011

SUNSHINE, LLC
2611 CITRUS LAKE DRIVE
C-203
NAPLES, FL 34109

SUBJECT: SUNSHINE, LLC
Ref. Number: L04000088553

We have received your document for SUNSHINE, 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 011A00020921

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunshine 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:

Rhonda S. Mullis
Name of Person

(MANAGING MEMBER) Sunshine LLC
Firm/Company

2611 Citrus Lake Dr C-203
Address

Naples FL 34109
City/State and Zip Code

RSM5@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rhonda S. Mullis at (239) 671-2297
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: Sunshine LLC
2. (a) Principal office address of limited liability company: 2611 Citrus Lake Drive
C-203 Naples FL 34109
(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

12/8/2004
3. Date of filing/registration in Florida

LO4 0000 8805
4. Document number

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

Registered Agent:

Truman J Costello

Registered Office Address:

12670 New Brittany Blvd #101
Ft Myers FL 33907

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

NEW Registered Agent:

RHONDA S. Mullis

NEW Registered Office Address:

(**MUST BE FLORIDA STREET ADDRESS**)

2611 Citrus Lake Dr C-203
Naples FL 34109
FL

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.

Rhonda S. Mullis
Signature of a member or authorized representative of a member

RHONDA S. Mullis
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, 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.

Rhonda S. Mullis
Signature of Registered Agent

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

FILING FEE: \$25.00