L05000/5648

(Re	questor's Name)	
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T. CLINE
OCT 17 2012
EXAMNER



ACCOIDID NO TOGGGGGGGG				
ACCOUNT NO. : 12000000195				
REFERENCE : 375267 7685614				
AUTHORIZATION :				
COST LIMIT : \$ 25	~			
ORDER DATE: October 9, 2012				
ORDER TIME : 9:31 AM				
ORDER NO. : 375267-016	2212 SEC			
CUSTOMER NO: 7685614	23 2 7			
<u>CHANGE OF AGENT</u>	AM 9. 24 OF STATE EFLORIDA			
NAME: SUNRIDER PRODUCTIONS, LLC				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Harry B. Davis EXT# 2926 EXAMINER:				

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.

ž	
1. Name of the limited liability company: SUNRIDER P	RODUCTIONS, LLC
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	y: 320 Sparta Avenue Sparta, NJ 07871
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	P.O. Box 853 Sparta, NJ 07871
02/15/2005	L05000015648
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	4. Document number the records of the Florida Dept. of State:
Registered Agent:	Williams, Robert H Jr.
Registered Office Address:	100 N.E. 20th Terrace Deerfield Beach, FL 33441 US
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
intest be a combinational mobiless)	Tallahassee ,FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	et address of the registered office and the business ase of a Florida limited liability company, it is
Robert H. Williams, Jr., Authorized Person (Printed or typed name of signee)	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram jamiliar 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 notified.	agree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.
By: (Signature of Registered Agent) Corporation Service Company	
Division of Corporations, P.O. Box	. US41, LAHAHASSEC, FL S2314

FILING FEE: \$25.00