# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L06000042423

**Entity Name:** SUNBURST GROUP, LLC

| **Current Principal Place of Business:** | **New Principal Place of Business:** |
|---|---|
| 399 S.W. PALM COAST PARKWAY, #2<br>PALM COAST, FL 32137 | |

| **Current Mailing Address:** | **New Mailing Address:** |
|---|---|
| 399 SW PALM COAST PARKWAY<br>SUITE 2<br>PALM COAST, FL 32137 | |

**FEI Number: 20-4755453**     FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )
**In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.**

| **Name and Address of Current Registered Agent:** | **Name and Address of New Registered Agent:** |
|---|---|
| PAGAN, JON C<br>24 CLAYMONT COURT SO.<br>PALM COAST, FL 32137     US | |

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:   JON C PAGAN

Electronic Signature of Registered Agent                    Date

**MANAGING MEMBERS/MANAGERS:**                    **ADDITIONS/CHANGES:**

| Title: | MGR     ( ) Delete | Title: | MGR     (X) Change ( ) Addition |
|---|---|---|---|
| Name: | IREY, MELODYE | Name: | IREY, MELODYE |
| Address: | 2 BLAIRTON COURT | Address: | 24 CLAYMONT COURT SOUTH |
| City-St-Zip: | PALM COAST, FL 32137 | City-St-Zip: | PALM COAST, FL 32137 |

| Title: | MGR     ( ) Delete | Title: | ( ) Change ( ) Addition |
|---|---|---|---|
| Name: | PAGAN, JON | Name: | |
| Address: | 24 CLAYMONT COURT SOUTH | Address: | |
| City-St-Zip: | PALM COAST, FL 32137 | City-St-Zip: | |

| Title: | MGR     ( ) Delete | Title: | ( ) Change ( ) Addition |
|---|---|---|---|
| Name: | SOARES, JOE | Name: | |
| Address: | 33 RED CLOVER LANE | Address: | |
| City-St-Zip: | PALM COAST, FL 32164 | City-St-Zip: | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:   JON C PAGAN                                        MGR                    10/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date