

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000026293

Entity Name: SUNBURST SERVICES, LLC

FILED  
Dec 02, 2009  
Secretary of State

## Current Principal Place of Business:

1125 VILLAGIO CIR  
SARASOTA, FL 34237 US

## New Principal Place of Business:

2965 BEE RIDGE ROAD  
SARASOTA, FL 34239 US

## Current Mailing Address:

PO BOX 52754  
SARASOTA, FL 34237 US

## New Mailing Address:

PO BOX 52754  
SARASOTA, FL 34232 US

FEI Number: 20-8618008      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

MCCARTHY, JAMES T  
1125 VILLAGIO CIRCLE  
108  
SARASOTA, FL 34237 US

## Name and Address of New Registered Agent:

DEAS, RACHEL  
2965 BEE RIDGE ROAD  
SARASOTA, FL 34239 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: RACHEL DEAS

12/02/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: DEAS, RACHEL E  
Address: 1125 VILLAGIO CIRCLE, #204  
City-St-Zip: SARASOTA, FL 34237 US

Title: MGRM (X) Delete  
Name: MCCARTHY, JAMES T  
Address: 1125 VILLAGIO CIR  
City-St-Zip: SARASOTA, FL 34237 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: DEAS, RACHEL E  
Address: PO BOX 52754  
City-St-Zip: SARASOTA, FL 34232 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: RACHEL DEAS

MS

12/02/2009

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