

L10000036723

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

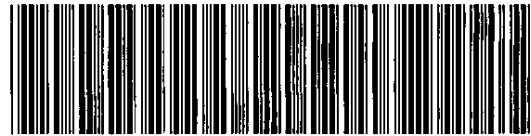
Special Instructions to Filing Officer:

A. LUNT

AUG 19 2010

EXAMINER

Office Use Only



500183345455

07/19/10--01026--026 **35.00

2010 AUG 18 PM 12:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 21, 2010

KENNETH DEAN GRUNER
319 MIRACLE STRIP PKWY SW
FT. WALTON BEACH, FL 32548

SUBJECT: SONSHINE MOTORS, LLC.
Ref. Number: L10000036723

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 AUG 18 PM 12:38

FILED

We have received your document for SONSHINE MOTORS, 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) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 510A00017687

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sonshine Motors, 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:

Kenneth D. Gruner
Name of Person

Sonshine Motors, LLC
Firm/Company

319 Miracle Strip Pkwy SW
Address

Ft Walton Bch, FL 32548
City/State and Zip Code

Sonshinemotors98@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hannah G. Finley at (850) 226-8818
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

FILED
2010 AUG 18 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Sonshine Motors, LLC
2. (a) Principal office address of limited liability company: 319 Miracle Strip Pkwy SW
☐ (Note: **MUST BE STREET ADDRESS**) Fort Walton Beach, FL 32548

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

5-1-10 3. Date of filing/registration in Florida L10000036723 4. Document number

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

Registered Agent: Howard G. Leavins III
Registered Office Address: (630 Larkin Dr FWB, FL)
319 Miracle Strip Pkwy SW
Fort Walton Beach, FL 32548

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

NEW Registered Agent: Kenneth D. Gruner
NEW Registered Office Address: 319 Miracle Strip Pkwy SW
(MUST BE FLORIDA STREET ADDRESS) Fort Walton Beach, FL 32548

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.

Kenneth D. Gruner
Signature of a member or authorized representative of a member

Kenneth D. Gruner
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.

Kenneth D. Gruner
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

2010 AUG 18
SECRETARY OF
TALLAHASSEE
FILED