110000079183

(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:		
APR 0.3 2012		
L. SELLERS		

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THE TAKE WAS THE

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COVER LETTER

TO: Registration Section Division of Corporations	·			
SUBJECT: Sunshine Mechanical, LLC Name of Limited Liability Company				
Name of	Elimited Diability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning	g this matter to the following:			
Ed Cerni				
Name of Person				
Sunshine Mechanical, LL	.с			
Firm/Company				
250 Lincoln Road				
Address				
Casselberry, FL 32707				
City/State and Zip Code				
E-mail address: (to be used for future annual repor	t notification)			
For further information concerning this ma				
Ed Cerni	at (407) 332-3764			
Name of Person	Area Code & Daytime Telephone Number			
CTREET/COURIED ADDRESS.	MAILING ADDRESS.			
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301				
Enclosed is a check for the follow	ing 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:S	Sunshine Mechanical, LLC		
2.	(a) Principal office address of limited liability company	y: 250 Lincoln Road Casselberry, FL 32707		
	(Note: MUST BE STREET ADDRESS)			
	(b) Mailing address of limited liability company:	Same		
	(Note: MAY BE POST OFFICE BOX)			
	July28,2010	L10000079183		
3.		4. Document number		
5.	(a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of S	late:	
	Registered Agent:	Spiegel & Utrera, P.A.		
. Toka internal site	Registered Office Address:	1840 Southwest 22nd Street, 4t Miami, Florida 33145	h floor,	
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	W Registered Office address:		
	NEW Registered Agent:	Maria Contreras		
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	250 Lincoln Road		
	(MUSI BE FLORIDA STREET ADDRESS)	Casselberry ,FL3	2707	
co an- lia of or Sig	the limited liability company is not organized under the Infirmed that after the change or changes are made, the Fl d the business office of the registered agent will be ident bility company, it is hereby confirmed that the change(s) the members of the limited liability company or as other the operating agreement of the limited liability company nature of a member or authorized presentative of a member Edward M. Cerni, MGR. Inted or typed name of signee Thereby accept the appointment as registered agent and a mply with the provisions of all statutes relative to the product of the provision of the product of the	lorida street address of the registered ical. Or, in the case of a Florida lim was/were authorized by an affirmat wise provided in the article of organ APR -2 PR -2 PR -2	l office ited ive vote nization	
X	dress, I hereby confirm that the limited liability company	has been notified in writing of this	chänge.	

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