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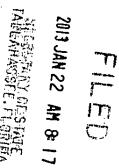
(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Busin	ess Entity Name)	
(Document Number)		
Certified Copies	Certificates of Statu	s
Special Instructions to Fil	ng Officer:	

Office Use Only



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J. SAULSBERRY EXAMINER JAN 23 2013

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Sun S	Steaks, LLC			
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this ma	atter to the following:			
Legal Name of Person Sun Holdings, LLC Birm/Company				
3318 Forest Lane, Suite Address Dallas, TX 75234 City/State and Zip Code				
legal @ Sunnoldings. net E-mail address: (to be used for future annual report notification	on) & T			
For further information concerning this matter, ple	ase call:			
Lauren Glesby at (972) 620 - 2287 x . 244 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			

INHS18 (5/08)

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.

Name of the limited liability company:	Sun Steaks, LLC		
2. (a) Principal office address of limited liability com	pany:		
(Note: MUST BE STREET ADDRESS)	6942 W. HILLSBOROUGH AVE. TAMPA FL 33634		
(b) Mailing address of limited liability company:			
(Note: MAY BE POST OFFICE BOX)	6942 W. HILLSBOROUGH AVE. TAMPA FL 33634		
11/29/2010	L10000122715	;	
3. Date of filing/registration in Florida	4. Document number	4. Document number	
5. (a) Registered Agent and Registered Office shown	n on the records of the Florida Dept.	of State:	
Registered Agent:	TURNER, MICHELLE	TURNER, MICHELLE	
Registered Office Address:	6942 W. Hillsborough Ave. Tampa, FL 33634		
(b) Enter name of <u>NEW Registered Agent</u> and/or		3 JAN 22 E NETAFO	
NEW Registered Agent:	InCorp Services, Inc.		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	17888 67th Court North	7 4	
	Loxahatchee	,FE33470—	
If the limited liability company is not organized under confirmed that after the change or changes are made, t and the business office of the registered agent will be liability company, it is hereby confirmed that the chan of the members of the limited liability company or as or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	the Florida street address of the regindentical. Or, in the case of a Floridage(s) was/were authorized by an affective provided in the articles of	stered office la limited firmative vote	
Guillermo Perales Princed or typed name of signee			
I hereby accept the appointment as registered agent a camply with the provisions of all statutes relative to the alid I am familiar with and accept the obligations of fluoriday 608, F.S. Or, if this document is being filed to the limited liability comes in the liability comes in the limited liability comes in the liability comes in the liability comes in the liability c		further agree to e of my duties, rovided for in istered office f this change.	
Division of Corporations, P.O. Bo			