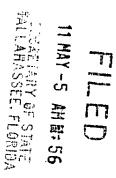
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Office Use Only



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D. BRUCE

MAY 0 6 2011

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
			EXTILES LLC Liability Company		
Door	Sir or Madam:				
Dear s	or wiadam.				
The er	nclosed Registered Agent/Registered	Office C	change and fee(s) ar	e submitted	for filing.
Please	return all correspondence concerning	g this ma	itter to the followin	g:	
_	CARLOS F. MANCILLA				
	Name of Person				** J
	SUN TEXTILES LLC				HAY -5
	Firm/Company				\$5. T
					SE CH
	_8325 NW 68 STREET				1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
	Address				59 4
					8
	MIAMI FL 33166				3 8
	City/State and Zip Code				
——————————————————————————————————————	eula.gonzalez@suntextilesllc.	com notification	n)		
For fu	rther information concerning this mat	ter, plea	se call:		
	Euladean Gonzalez	at (305)	629-8350	0
	Name of Person		Area Code & Da	ytime Telephone	Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, Flori	on orations	
	Enclosed is a check for the following	ng amo	unt:		
	\$25 Filing Fee		\$55 Filing Fee	& Certified	Сору

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 TEXTILES LLC					
2. (a) Principal office address of limited liability company	8325 NW 68 STREET					
(Note: MUST BE STREET ADDRESS)	MIAMI FL 33166					
(b) Mailing address of limited liability company:	8325 NW 68 STREET					
(Note: MAY BE POST OFFICE BOX)	MIAMI FL 33166					
02/19/2011	L11000016951					
3. Date of filing/registration in Florida	4. Document number					
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
Registered Agent:	CARLOS F. MANCILLA					
Registered Office Address:	5072 NW 112th COURT					
	DORAL, FL 33178 ₹ 17					
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent:						
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8325 NW 68 STREET					
(MOST BE PLORIDA STREET ADDRESS)	MIAMI ,FL33166					
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. Signature of a member or authorized representative of a member CARLOS F. MANCILLA 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 obligatory of my position as registered agent as provided for in Chapter 608, J.S. Or, is the comment 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.						

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