

# L11000114231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

12 OCT 16 AM 10:25

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DEPARTMENT OF STATE  
12 OCT 16 AM 10:50

K. SALLY  
EXAMINER  
OCT 17 2012



COST LIMIT : \$ 25

CUSTOMER NO: 7685614

EXAMINER: \_\_\_\_\_

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: SUNRIDER BEACH RESORT, LLC

2. (a) Principal office address of limited liability company: 320 Sparta Avenue  
(Note: **MUST BE STREET ADDRESS**) Sparta, NJ 07871

(b) Mailing address of limited liability company: P.O. Box 853  
(Note: **MAY BE POST OFFICE BOX**) Sparta, NJ 07871

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OCT 16 AM 9:25  
TALLAHASSEE, FLORIDA

10/05/2011

3. Date of filing/registration in Florida

L11000114231

4. Document number

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

Registered Agent: Williams, Robert H Jr.

Registered Office Address: 100 N.E. 20th Terrace  
Deerfield Beach, FL 33441 US

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

NEW Registered Agent: Corporation Service Company

NEW Registered Office Address: 1201 Hays Street  
(**MUST BE FLORIDA STREET ADDRESS**) Tallahassee, FL 32301

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)

Robert H. Williams, Jr., Authorized Person

(Printed or typed name of signer)

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.

By: Sylvia Queppet

(Signature of Registered Agent)

Corporation Service Company Sylvia Queppet, Asst. Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00