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SECRETARY OF STATE

FEB 2 6 2015 T. CARTER

COVER LETTER

INHS18 (2/14)

TO:		stration Section sion of Corporations						
SUBJI	FCT∙	SUNRAY HOME SOLUTIONS LLC						
50.001	EC1.	Name of Limited Liability Company						
Dear S	ir or N	Madam:						
The en	close	d Registered Agent/Registered Offi	ce Change and fe	e(s) are submitted for filing.				
Please	returi	all correspondence concerning thi	s matter to the fol	llowing:				
DAVI	ID A.	WRAY						
		Name of Person		•				
SUN	RAY	HOME SOLUTIONS LLC						
		Firm/Company		-				
913 I	LIGH	THOUSE ROAD						
		Address		•				
FOR	T W	ALTON BEACH, FL 32547						
		City/State and Zip Code		-				
dwra	ywna	a@yahoo.com						
	E-mai	l address: (to be used for future ann	ual report notification	ation)				
For fu	rther	information concerning this matter,	please call:					
DAV	ID A.	WRAY	808	426-8166				
		Name of Person		Area Code & Daytime Telephone Number				
	Reg Div Clif 266	REET/COURIER ADDRESS: gistration Section vision of Corporations fton Building via Executive Center Circle lahassee, Florida 32301	Regi Divis P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, Florida 32314				
Enclosed is a check for the following amount:								
	2 9	\$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 605.0114 or 605.0116, 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. N	ame of the limited liability company:	ME SO	LUTIONS	LLC		
2. (a)	917 LIGHTHOUSE ROAD	(b) 917 LIGHTHOUSE ROAD				
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*	,	Mailing address of limited (Note: MAY BE POST	-	
	FORT WALTON BEACH, FL 32547		FORT W	ALTON BEACH,	FL 32	547
	06/18/2013	_	L1300008	37453		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a	RENEE M. SY					
	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	:		
	913 LIGHTHOUSE RD, FORT WALTON BE	EACH F	L 32547			
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS	2			
	913 LIGHTHOUSE ROAD					Žω
	FORT WALTON BEACH , FL	32547			5 FEB	ECRE
(b)	DAVID A. WRAY		· 		23	ASSVI VRV ULA
(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:		AM II: 05	
					=	10.1. 71.8.
	NEW Registered Office Address:				05	RIDA
	NEW Registered Office Address.					
	, FL	- <u></u>				
the chagent was/v	limited liability company is not organized under the latange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	f the registability considers of the limited length.	stered office ompany, it is sited liability	e and the business of s hereby confirmed to y company or as other apany.	fice of that the	he registered change(s)
Sign	ature of a member or authorized representative of a member			Printed or typed name of	of signee	
the ol	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I d in writing of this change	ree to act perform d for in (hereby c	in this capa ance of my a Chapter 605 onfirm that i	acity. I further agre duties, and I am fam , F.S. Or, if this doc the limited liability o	e to com iliar wit cument i company	nply with the th and accept is being filed v has been
Signat	ture of Registered Agent					

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