1300098658

(Requestor's Name)				
(Add	ress)			
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(City	/State/Zip/Phone	#)		
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COVER LETTER

FO: Registration Section Division of Corporations	A			
Sunray Software, LLC				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter	to the following:			
Eric Grossman	1			
Name of Person				
Sunray Software, LLC				
Firm/Company				
1207 Sweet Jasmine Drive				
Address				
Trinity, FL 34655				
City/State and Zip Code				
egrossman@tampabay.rr.com				
E-mail address: (to be used for future annual repor	t notification)			
For further information concerning this matter, please ca	all:			
Eric Grossman 72	27 215-7818			
Name of Person	Area Code & Daytime Telephone Number			
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 32301	Tallahassee, Florida 32314			
Enclosed is a check for the following amount	:			
☑ S25 Filing Fee	□ \$55 Filing Fee & Certified Copy			

INHS18 (2/14)

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.

L. No	ame of the limited liability company: Sunray Softw	are, LL	.C	
2. (a)		(1	o)	
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		of limited liability company: BE POST OFFICE BOX)
	1207 Sweet Jasmine Drive		1207 Sweet Jasmi	ne Drive
	Trinity, FL 34655		Trinity, FL 34655	
	07/11/2013		L13000098658	
3.5. (a)	Date of filing/registration in Florida Eric Grossman	4.	Document i	number
. ⁷ . (a)	Registered Agent and Registered Office shown on the records of Eric Grossman	the Florid	a Dept, of State:	-
	Registered Office Address (MUST BE FLORIDA STREET). 3399 Mermoor Drive Apt 207	IDDRES	51	- ,
	Palm Harbor, FL	34685		. <u>.</u> .
(b)	Eric Grossman Enter name of NEW Registered Agent and/or NEW Registered Eric Grossman	Office ac	<u>ldress</u> :	
	NEW Registered Office Address:			
	1207 Sweet Jasmine Drive			
	Trinity, FL	34655		
the cha agent was/wa the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like or authorized by an affirmative vote of the members of icles of organization of the operating agreement of the nature of a member of authorized representative of a member by accept the appointment as registered agent and agriculture of all statutes relative to the proper and complete ligations of all statutes relative to the proper and complete ligations of my position as registered agent as provided in oriting of this change.	the reginability confither the linited	stered office and the bus ompany, it is hereby con- nited liability company of liability company. Printed or typ	siness office of the registered firmed that the change(s) or as otherwise provided in led name of signee

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

Signature of Registered Agent