## L13000101289

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## **COVER LETTER**

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INHS18 (2/14)

	Registration Section Division of Corporations						
SUBJEC	SUN CAPITAL INVESTMEN	IT GROUP LL	С				
Name of Limited Liability Company							
Dear Sir	or Madam:						
The encl	osed Registered Agent/Registered Offic	ce Change and fo	ee(s) are submitted for filing.				
Please re	turn all correspondence concerning this	s matter to the fo	ollowing:				
Jeanne	Fuentes Lopez						
	Name of Person		-				
Fowler	White Burnett, P.A.						
	Firm/Company		-				
1395 B	rickell Avenue, Suite # 1400						
	Address		-				
Miami,	Florida 33131						
	City/State and Zip Code		-				
jfuentes	s-lopez@fowler-white.com						
E-n	nail address: (to be used for future annu	al report notification	ation)				
For furth	er information concerning this matter, p	please call:					
Jeanne	Fuentes Lopez	305	789-9269				
	Name of Person	(	Area Code & Daytime Telephone Number				
R D C 2	RECT/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 661 Executive Center Circle Callahassee, Florida 32301	Regis Divis P.Q.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, Florida 32314				
Enclosed is a check for the following amount:							
ū	3 \$25 Filling Fee	<b>□</b> \$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.	Na	me of the limited liability company: SUN	CAPITAL	. INVI	ESTMEN	T GROUP LLC
2. (		Principal office address of limited liability co	mpany:			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		c/o 1395 Brickell Avenue, 14th Floo	<del></del>		c/o 139	95 Brickell Avenue, 14th Floor (JFL)
		Miami, Florida 33131		<b>-</b> -	Miami,	Florida 33131
		07/17/2013			L13000	101289
3.		Date of filing/registration in Florid	a	4.		Document number
5. (	(a)	Registered Agent and Registered Office shown on the Corporate Management Inc			<del></del>	
		Registered Office Address (MUST BE FLORIDA 16321 SW 78th Terrace	FILE 2011 JUN 13 SECRETARS TALLAHASS			
		Miami	FL 3	3193	}	CAETASSE
(1	b) .	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> NEW Registered Office Address:	Registered O	ffice a	ldress:	PH 3: 57 PF STATE EE. FLORIDA
		1395 Brickell Avenue, Suite # 1400	(JFL)			<del></del>
		Miami .	, FL_3	3131		
the cagen was/	chai it w /we	mited liability company is not organized unonge or changes are made, the Florida street a will be identical. Or, in the case of a Florida are authorized by an affirmative vote of the notes of organization or the operating agreements.	ddress of the limited liab members of	ne regi ility c the lir	stered office ompany, it noted liabil	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
				Je	anne Fue	ntes Lopez
I he prov the c to m notij	reb Visio Obli ere fiea	ure of a member or authorized representative of a mem by accept the appointment as registered agen- ons of all statutes relative to the proper and gations of my position as registered agent as by reflect a change in the registered office and in writing of this change.		e to ac erforn for in reby c	t in this ca lance of my Chapter 60 onfirm tha	Printed or typed name of signee  pacity. I further agree to comply with the oduties, and I am familiar with and accept 15, F.S. Or, if this document is being filed t the limited liability company has been
Sign	atur	Division of Corporation	s• P.O. Bo ILING FEI			assee, FL 32314