L13000150858

(Requestor's Name)						
(Address)						
(Address)						
(City/	/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
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COVER LETTER

TO:	Registration Section Division of Corporations							
SHRI	SUNSHINE REALTY OF FLORIDA LLC							
50 D 5	Name of Limited Liability Company							
Dear S	Sir or Madam:							
The er	nclosed Registered Agent/Registered Office C	lhai	nge and	fee(s) a	re sub	mitted for filing.		
Please	Please return all correspondence concerning this matter to the following:							
	CAROL RICE							
	Name of Person			Whome-				
	SUNSHINE REALTY OF FLORIDA	LL(0		P.	lease Veriby		
	Firm/Company 287 RANDON TER				2	Please Verify 21P code on sel of your		
	Address			_	_	sel of your		
	LAKE MARY, FL 32746					records:		
	City/State and Zip Code					should be		
	Broker@SunshineRF.com					32746 everywhere		
	E-mail address: (to be used for future annual i	epc	ort notif	cation)		3 x 1 76 300 april 10 10		
For fu	rther information concerning this matter, plea	ise (call:			•		
	CAROL RICE	t (407	620)-256	4		
	Name of Person	٠ ١		Area (Code &	& Daytime Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:								
	■ \$25 Filing Fee		□ \$5	5 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.

1. N	ame of the limited liability company: SUNSHINE	REALTY	OF FLORIDA LLC
2. (a)		_ (b)_	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (=,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	287 RANDON TER	_	287 RANDON TER
	LAKE MARY, FL 32746	_	LAKE MARY, FL 32746
	OCTOBER 21, 2013		L13000150858
3.	Date of filing/registration in Florida	4.	Document number
5. (a)		
	Registered Agent and Registered Office shown on the records of the	e Florida De	pt. of State:
	CAROL RICE		
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS)	
	266 VIA TUSCANY LOOP		
	LAKE MARY	32748	
(b)			뇥 됐
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office addres	Jul 27
	CAROL RICE		
	NEW Registered Office Address:		
	287 RANDON TER		<u> </u>
	LAKE MARY	32746	
the chagent was/w the ar Sign I herr provis the object to me motific	limited liability company is not organized under the law ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liability or authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the lature of a member or authorized representative of a member or authorized representative of a member and agree to the appointment as registered agent and agree sions of all statutes relative to the proper and complete pulications of my position as registered agent as provided are ty reflect a change in the registered office address, I have a registered agent as provided the proper and complete pulications of this change.	the register bility composite the limited liab	ed office and the business office of the registered pany, it is hereby confirmed that the change(s) diability company or as otherwise provided in ility company. CAROL RICE Printed or typed name of signee this capacity. I further agree to comply with the