## 44000104110

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## **COVER LETTER**

TO:

INHS18 (2/14)

FO: Registration Section Division of Corporations					
SUBJECT: Sunrise Investment Partners, L Nam	<u>LC</u> ne of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.				
Please return all correspondence concerning thi	s matter to the following:				
Kathy Moro					
Name of Person					
Frank Weinberg Black, P.L.	· ·	100. 101 108 mg			
Firm/Company	<del></del>				
7805 SW 6th Court		TILED			
Address		7 3			
Plantation, FL 33324		 س			
City/State and Zip Code					
Lynda.Watkins@Stiles.com KMoro@fwblaw.net E-mail address: (to be used for future ann	ual report notification)				
For further information concerning this matter,	please call:				
Lynda Watkins	at ( <u>954) 627-9350</u>				
Name of Person	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	S55 Filing Fee & Certified Copy				

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTHFOR 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.	Nai	ne of the limited liability company: Sunrise Investn	nent Partne	<u>iers, LLC</u>
2	(a) A	TTFN: Lynda Watkins	(b)	) SAME
	(u) <u>-</u>	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  301 E LAS OLAS BLVD		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		FT. LAUDERDALE, FL 33301		
		06/30/2014		L14000104110
3.		Date of filing/registration in Florida	4.	Document number
5.		CORPORATION SERVICE COMPANY Registered Agent and Registered Office shown on the records of	The Florida I	Dept. of State:
		1201 HAYS STREET		2
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				1,007
		TALLAHASSEE FI	L <u>32301</u>	· • • • • • • • • • • • • • • • • • • •
	(b)	FRANK WEINBERG & BLACK P.L.		53
	` ,	Enter name of NEW Registered Agent and/or NEW Registered	l Office addr	dress:
		7805 SW 6th Court		
		NEW Registered Office Address:		ယု
		C/O DAVID BLACK, ESQ.		
		<u>PLANTATION</u> , FI	L <u>33324</u>	<del></del>
the age	char ent w is/we	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited liare authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ws of the S f the registe ability com of the limit c limited lia	State of Florida, it is hereby confirmed that after stered office and the business office of the registered mpany, it is hereby confirmed that the change(s) sited liability company or as otherwise provided in liability company.
_	iionut	ure of a member or authorized representative of a member		Printed or typed name of signee
In pre the to no	hereb ovisie obli mere tified	by accept the appointment as registered agent and agons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address. It in writing of this change.		in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been
- 51	gnatui	e of Registered Agent		