

L170000018462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

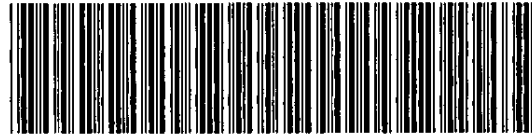
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17 JUN - 1 AM 7:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 01 2017
J SHIVERS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunshine Birding, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tamar Boorstin

Name of Person

Sunshine Birding LLC dba Wild Birds Unlimited of Pal

Firm/Company

11 Wiltshire Pl

Address

Palm Coast, FL 32164

City/State and Zip Code

wbupalmcoast@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tamar Boorstin

at (407) 718-6222

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

☐ \$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. Name of the limited liability company: Sunshine Birding, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

11 Wiltshire Pl

Palm Coast, FL 32164

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

11 Wiltshire Pl

Palm Coast, FL 32164

1/24/2017

L17000018462

3. Date of filing/registration in Florida

4. Document number

5. (a) Tamar Boorstin

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

1162 Saddlehorn Cir

Winter Springs, FL 32708

(b) _____
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:

11 Wiltshire Pl

Palm Coast, FL 32164

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Tamar Boorstin
Signature of a member or authorized representative of a member

Tamar Boorstin

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Tamar Boorstin
Signature of Registered Agent

FILED
17 JUN - 1 AM 7:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA