

L19 000 250084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

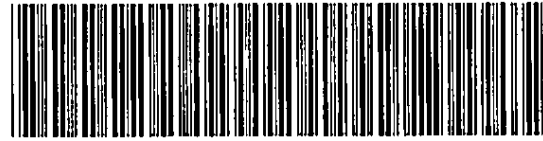
(Business Entity Name)

(Document Number)

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20 JAN 30 PM 3:14

FEB 25 2020
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SUNSHINE DIAGNOSTICS LABORATORY, 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:

SHADE NAKHLEH

Name of Person

SUNSHINE DIAGNOSTICS LABORATORY, LLC

Firm/Company

P.O. BOX 10868

Address

RIVIERA BEACH, FLORIDA 33419

City/State and Zip Code

sund.laboratory@gmail.com

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

For further information concerning this matter, please call:

SHADE NAKHLEH

Name of Person

561 305-0290
at (_____) _____

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

20 JAN 30 PM 3:14
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

**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 DIAGNOSTICS LABORATORY, LLC
2. (a) 1665 MARTIN LUTHER KING JR BLVD
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
RIVIERA BEACH, FLORIDA 33404
- (b) P.O. BOX 10868
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
RIVIERA BEACH, FLORIDA 33419
3. 10/04/2019
Date of filing/registration in Florida
4. L19000250084
Document number
5. (a) BELAL HIGAS
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1665 MARTIN LUTHER KING JR BLVD
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
RIVIERA BEACH, FL 33404
- (b) SHADE NAKHLEH
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1665 MARTIN LUTHER KING JR BLVD
NEW Registered Office Address:
RIVIERA BEACH, FL 33404

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.

Bash Halum
Signature of a member or authorized representative of a member

BASIM HALUM

Printed or typed name of signee

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.

Shade Nakhleh
Signature of Registered Agent

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

20 JAN 30 PM 3:15
STATE OF FLORIDA
DIVISION OF CORPORATIONS