L23000550214

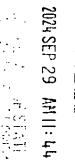
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates	of Status				
Special Instructions to Filing Officer:						
J. HORNE						
J. HORNE SEP - 6 2024						

Office Use Only



600435549836

08/29/24--01011--008 **25.00



COVER LETTER

TO: Registration Section Division of Corporations							
SUNSET HOLDING INVESTMENT I	PARTNERS LLC						
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office	c Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this	matter to the following:						
ELIANA MARRERO							
Name of Person							
Firm/Company							
14328 SW 14TH STREET							
Address							
MIAMI FL 33184							
City/State and Zip Code							
1061INVESTMENT@GMAIL.COM							
E-mail address: (to be used for future annua	l report notification)						
For further information concerning this matter, pl	lease call:						
ELIANA MARRERO	305 588-5223 at ()						
Name of Person	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 a	mount:						
■ \$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. N	ame of the limited liability company: SUNSET HOLDIN	GINV	/ES	TMENT	F PARTNERS LLC
2. (a)	14328 SW 14TH STREET		(b)	14328 S	SW 14TH STREET
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- '	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33184	_		MIAMI,	FL 33184
	12/13/2023	_	L	2300055	50214
3.	Date of filing/registration in Florida	4.	-		Document number
5. (a)	A-AMERICAN FINANCIAL & TAX SERVICES CORP				
υ. (u)	Registered Agent and Registered Office shown on the records of the 13200 SW 128 STREET	e Flori	da I	ept. of S	tate:
	Registered Office Address	DDRES	<u>S.S)</u>		
	MIAMI TI 3	3186			
	, FL				— <u>1024</u>
(b)					SEP FI
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>)ffice a	ddı	<u>ess</u> :	29
	ELIANA MARRERO				FILED 2024 SEP 29 AH 11: 44 2024 SEP 29 AH 11: 44
	NEW Registered Office Address:				
	14328 SW 14TH STREET				
	MIAMI , FL ³	3184			
change agent was/was/was/was/was/was/was/was/was/was/	imited liability company is not organized under the laws or changes are made, the Florida street address of the rewill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the limited of a member or authorized representative of a member	egiste: ility c the lii mited	red om mit lia	office a pany, it ed liabil	and the business office of the registered is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.
I here provisi the obi to mer notifie	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete policy ions of my position as registered agent as provided yelv reflect a change in the registered office address. I he din writing of this change.	erforn	าสท	ce of m	pacity. I further agree to comply with the values, and I am familiar with and accept

FILING FEE: \$25.00

1NHS18 (2/14)