

L24000305722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

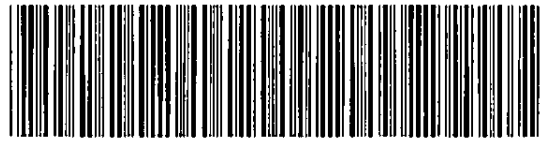
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 23, 2024

SALLY TAMAYO
SUNNY ESCAPES RENTALS LLC
2021 OLIVER PL
WINTER HAVEN, FL 33881

SUBJECT: SUNNY ESCAPES RENTALS LLC
Ref. Number: L24000305722

We have received your document for SUNNY ESCAPES RENTALS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

RUSSELL L HUNT
Regulatory Specialist III

Letter Number: 924A00021267

RECEIVED

OCT 10 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunny Escapes Rentals 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:

ATTN: Sally Tamayo

Name of Person

Firm/Company

2021 Oliver Pl

Address

Winter Haven, FL 33881

City/State and Zip Code

sntamayo1@gmail.com

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

For further information concerning this matter, please call:

Sally Tamayo

at (863) 332-9793

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 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: Sunny Escapes Rentals LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

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

7602 Spring Oak Lane

Davenport, FL 33837

Mailing address of limited liability company:

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

2021 Oliver Pl

Winter Haven, FL 33881

07/09/2024

L24000305722

3. Date of filing/registration in Florida 4. Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

REGISTERED AGENTS INC

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

7901 4TH STREET N SUITE 300

ST. PETERSBURG, FL 33702

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

ATTN: Sally Tamayo

NEW Registered Office Address:

2021 Oliver Pl

Winter Haven, FL 33881

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.

Sally Tamayo
Signature of a member or authorized representative of a member

Sally Tamayo

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.

Sally Tamayo
Signature of Registered Agent