

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90056 011 ****50.00

DOCUMENT # L98000002294

1. Entity Name

SUNRISE Management Systems L.L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

400 N. Tampa ST.

3. Mailing Address

115 E. Whiting ST

Suite, Apt. #, etc.

1170

Suite, Apt. #, etc.

#113

City & State

Tampa FL

City & State

Tampa FL

Zip

33602

Country

USA

Zip

33602

Country

USA

4. FEI Number

65-0885005

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Robert E. Porterfield Jr.

Street Address (P.O. Box Number is Not Acceptable)

400 N. Tampa ST.

City

Tampa

FL

Zip Code

33602

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Robert E. Porterfield Jr.

ROBERT E. PORTERFIELD JR

4-23-02

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE Manager
NAME Robert E. Porterfield Jr
STREET ADDRESS 400 N. Tampa ST Suite 1170
CITY-ST-ZIP Tampa FL 33602

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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Robert E. Porterfield Jr

ROBERT E. PORTERFIELD JR

4-23-02 (813) 222-0012

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/01)