MD30000003131

(Re	equestor's Name)					
(Address)						
(Address)						
(Ci	ty/State/Zip/Phone	#) .				
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
· (Document Number)··						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						





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11/23/09 --01049 --021 **25.00

12/10/09--01011--020 **60.00

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:_	SUNNY CORRAL MANAGEMENT, LLC				
	(Name of Limited Liability Company)				
DOCUMEN	T NUMBER: M03000003731				
The enclosed for filing.	Resignation of Registered Agent for a Limited Liability Company and fee are submitted				
Please return	all correspondence concerning this matter to the following:				
	Rhonda Maybin (Name of Person)				
	Capitol Corporate Services, Inc. (Name of Firm/Company)				
	800 Brazos, Suite 400 (Address)				
<u></u>	Austin, Texas 78701 (City/State and Zip Code)				
For further in	nformation concerning this matter, please call:				
	Rhonda Maybin at (800) 345-4647 (Name of Person) (Area Code & Daytime Telephone Number)				

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Return Acknowledgment to:





FLORIDA DEPARTMENT OF STATE Division of Corporations

December 1, 2009

RHONDA MAYBIN CAPITOL CORPORATE SERVICES, INC. 800 BRAZOS, SUITE 400 AUSTIN, TX 78701

SUBJECT: SUNNY CORRAL MANAGEMENT, LLC

Ref. Number: M03000003731

We have received your document for SUNNY CORRAL MANAGEMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as registered agent of an active limited liability company is \$85.00.

There is a balance due of \$60.00.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 509A00036839

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions o	f section 608.416(2) c	or 608.509, Flori	da Statutes, the undersig	gned,
Capitol	Corporate Services,	Inc.	, hereby resigns	as
(Na	me of Registered Agent)			
Registered Agent for	SUNNY (CORRAL M	ANAGEMENT, I	_LC
	(Name of Limited	Liability Company	r)	,
M03000003731 (Document Number, if	known)	-		
A copy of this resignation w	as mailed to the abov	e listed limited li	ability company at its la	ast known address.
The agency is terminated an	d the office discontinu	ued on the 31st d	lay after the date on whi	ch this statement is filed.
_	Chungisig	Royal gnature of Resigning	Agent)	
If signing on behalf of an en	tity:			せい
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		heryl Roberts d or Printed Name)		DO DEC 10 PM 1: 34
		President		C PST
_	((Capacity)		O SAY
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				<u> </u>
	FILING FEI	ES:		
	\$ 85.00 A \$ 25.00 A	ctive limited lial dministratively o vithdrawn limite	oility company dissolved/ voluntarily c d liability company	lissolved/

Make checks payable to Florida Department of State and mail to:

CORPORATIONS DIVISION

Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

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