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Office Use Only



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National Registered Agents, Inc. 10985 Cody Street Suite 118 Overland Park, KS 66210 800.550.6724 Fax 913.851.0713

National Registered Agents, Inc.

... "NRAI, the best choice for statutory representation"

June 17, 2004

Amendment Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Sunshine Estates, LLC Florida Change of Agent

Dear Sir/Madam,

For the purposes of changing the registered agent and registered office of the above captioned Sunshine Estates, LLC enclosed herewith, in duplicate, are a Statement of Change of Registered Office and/or Registered Agent accompanied by our check in the amount of Amount of Check.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed Business Reply Envelope.

Thank you in advance for your cooperation in this matter.

Very truly yours,

Lisa Reeves

Enclosure - Check

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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.

ugeni, or both, in the Stat	•					
1. The name of the limite	ed liability company is	. Sunshine Es	tates,	LLC		
2. The mailing address o	f the limited liability c	ompany is : _	31	Button Shop	Road, Newtown,	_CT_
06470			-	· · · · · · · · · · · · · · · · · · ·		<u></u>
11/14/2003			M030	000003822		
3. Date of filing/registrat	ion in Florida		4. D	ocument numb	oer _	
5. The name of the register Florida Department of		stered office a	ddres	s as shown on	the records of the	
	Margaret Skuba					3
		Name			•	
	2765 Summer Brook S	Street				. ,
		Address			·	
	Melbourne, FL 32940	•				_
	City	, State and Zij	p			· • • •
6. The name and address	of the new registered a	ogent and/or o	ffice			
o. In main and addition	or the new registered t	.gom and, or o	11100.			
	NRAI Services, Inc.					<u> </u>
		Name				•
	526 E. Park Avenue					
	Florida street addres	ss (P.O. Box N	TO	acceptable)	, ,	
		`		1 ,		
	Tallahassee	FL 32301		ر يعد		
	City,	State and Zip				
If the limited liability conconfirmed that after the cand the business office of liability company, it is he the members of the limite the operating agreement of the limite the li	hange or changes are no the registered agent we reby confirmed that the ed liability company or of the limited liability of	nade, the Flor fill be identica e change(s) w as otherwise company.	ida sti L. Or	reet address of	f the registered office f a Florida limited	
		<u></u>	* : 2- 40 2- :	the second second		

(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 608, 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. NRAI Services.

(Signature of Registered Agent)

INH\$18(10/99)

FILING FEE: \$25.00