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SECRETARY OF STATE DIVISION OF CORPORATIONS OF STATE OF S

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COVER LETTER

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TO: Registration Section		
Division of Corporations		
5 M.T.	1 1 /10	
SUBJECT: Sun Mortgage (Name of Limited	Lending, CLC	
(Name of Limited	1 Liability_Company)	
Dear Sir or Madam:		
Dear on or wadam.		
The enclosed Registered Agent/Registered Office (Change and fee(s) are submitted for filing.	
	onening.	
Please return all correspondence concerning this m	atter to the following:	
-	•	
T I R. L		
David Book (Name of Person)		
(Name of Person)		
	14	
Sun Mortgage Len	ding	
(Rim/Company)	-	, 9
		i Se
1910 ST Joe Center Rd	Clabel	
1910 SI JOE CENTER Rd	\$/26/	。 5 5
(Address)	"	~~~
_		CORPORATION
toot Wayne In 4682		رم م
Fort Wayne Fr 46825 (City/Stafe and Zip Code) RPORATION 23 RPORATION 25		
, ,	•	.
For further information concerning this matter, plea	ase call:	
DDV	202 240 1013	
Dave Book at (2	260 740-6013	
(Name of Person)	(Area Code & Daytime Telephone Nu	umber)
STREET/COURIED ADDRESS.	EET/COURIER ADDRESS: MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amo	nunt.	
Enclosed is a cheek for the following and	·wiit.	
\$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 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.

1. The name of the limited liability company is: Sun Mortgage Lending LLC.
2. The mailing address of the limited liability company is: 1910 ST. Joe. Center.
STE 61 Fort Wayne, In 46825
9-9-04M04000036963. Date of filing/registration in Florida4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Susan Stokes
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. (Signature of a member or authorized representative of a member) 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 008, F.S. Or, if this document is being filed to merely reflect a change in the registered office and ress, I hereby confirm that the limited liability company has been notified in writing of this change. (Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00