## 142

(Requestor's Name)	_	
(Address)		
(Address)	_	
(City/State/Zip/Phone #)	_	
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status :	_	
Special Instructions to Filing Officer:	7	

ï

Office Use Only



100162671211

11/16/09--01042--019 \*\*25.00 -

2009 NOV 16 PH 1:31

SECRETARY OF STATE
AND ASSET FINDINA

M. THOMAS

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: SUN HEART VENT Name of Limited	TURES d Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office O	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
DONALD J. JACKSON Name of Person	2009 NOV SECRE TALLAR
SUN HEART VENTURES Firm/Company	TAR)
2068 OLD DAYTONA RD.  Address  PORT ORANGE FL. 32128  City/State and Zip Code	2009 NOV 16 PM 1:31 SECRETARY OF STATE TALLAHASSEE, FLORIDA
City/State and Zip Code	
E-mail address: (to be used for future annual report notification	on)
For further information concerning this matter, plea	ase call:
DONALO JACKSON at (	386 ) 843 - 0905  Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amo	ount:
\$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(0
1. Name of the limited liability company: Sun Ha	EART VENTURES
2. (a) Principal office address of limited liability company	: 2068 DLO DAYTONA RD.
(Note: MUST BE STREET ADDRESS)	PORT BRANGE, FL. 32128
(b) Mailing address of limited liability company:	2068 OLO DAYTONA RD.
(Note: MAY BE POST OFFICE BOX)	PORT GRANGE, Fl. 32128
1/16/2009  3. Date of filing/registration in Florida	M09000000242
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	JACKSON, DONALO J.
Registered Office Address:	139 CORAL CIRCLE SOUTH DAYTONA, FL. 32119
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:
NEW Registered Agent:	JACKSON, DONALD J.
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2068 OLD DAYTONA RD.
	PORT ORANGE ,FL 32/28
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company.	aws of the State of Florida, it is hereby orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization.
Signature of a member or authorized representative of a member	2009 NO
Printed or typed name of signee	JV 16 HASSE
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	gree to act in this capacity. I furthe pagree to per and complete performance of my auties, it in a registered agent as provided for invely reflect a change in the registered office has been notified in writing of this change.

Signature of Registered Agent