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TO:

Amendment Section

Division of Corporations
SUBJECT: Sunset TRP, Inc. Name of Corporation
DOCUMENT NUMBER: N1000009233
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Samuel Diller Name of Contact Person
Sunset TRP, Inc. Firm/Company
6105 SW 125th Avenue
6105 SW 125th Avenue Address Miami FL 33183 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Samuel Diller at (786) 877 - 9663 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes organized under the laws of the State of <u>FLO</u> egistered agent, or both, in the State of Florida.	<u>rida</u>
1. The name of the	he corporation: <u>Sunse+T</u>	RP, Inc	
2. The principal of	office address: 6105 SW	125 th Avenue	
	Miami, F	L 33/83	
3. The mailing ac	ddress (if different):N_A		
4. Date of incorp	oration/qualification: Oct. 1, 2	0010 Document number: N1000000	<u>09233</u>
5. The name and		red agent and registered office on file with the	
	Erin Bauer		
	6105 SW 125" A	Avenue 3	202 (
	Miami, FL 33183	3	17 1 L
6. The name and (if changed):	street address of the new registered	d agent (if changed) and /or registered offices	
	Samuel Diller		1: 1: C
	6105 SW 125 th	Avenue O. Box NOT acceptable	T Č
	Miami, FL 3318	3	
The street addre	ss of its registered office and the sibe identical.	treet address of the business office of its regist	tered agent,
Such change wa authorized by th	s authorized by resolution duly add board, or the corporation has been	opted by its board of directors or by an officer en notified in writing of the change.	- so
		Samuel Dil	101
_	re of an officer or director	Printed or typed name and title	
I hereby accept I further agree to of my duties, and document is beli corporation has	the appointment as registered ages to comply with the provisions of all d I am familiar with and accept the filed merely to reflect a change been notified in writing of this cha	nt and agree to act in this capacity. I statutes relative to the proper and complete per obligation of my position as registered agent in the registered office address, I hereby confange.	performance t. Or, if this firm that the
Sign	nature of Registered Agent	S/19/20	
Sam	half of an entity:		

* * * FILING FEE: \$35.00 * * *