

P000000 49392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

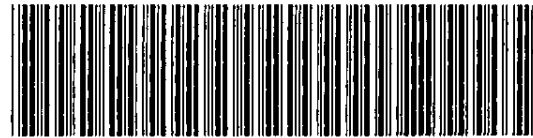
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

2/10/11



900193315129

02/09/11--01010--014 **35.00

RA
Chang
G

FILED
2011 FEB -9 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUNSET GENERAL SERVICES INC
Name of Corporation

DOCUMENT NUMBER: P00000049392

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:

RUBEN PACHECO

Name of Contact Person

RISE FINANCIAL GROUP CORP

Firm/Company

8245 NW 36 ST SUITE 6

Address

DORAL FLORIDA 33166

City/State and Zip Code

ADMINISTRACION@RISEFINANCIAL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RUBEN PACHECO

Name of Contact Person

at (

305

)

418-1585

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SUNSET GENERAL SERVICES INC
2. The principal office address: 7214 N.W. 34 ST.
MIAMI, FL 33122
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/18/2000 Document number: P00000049392

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

ALEXANDRA RUIZ 13703 SW 124 AVE RD

MIAMI FL 33186 (RESIGNED)

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LILIANA ANDRADE 13703 SW 214 AVE RD

MIAMI FL 33186 (CHANGED)

P.O. Box NOT acceptable

RECEIVED
TALLAHASSEE, FLORIDA

2011 FEB -9 AM 9:12

FILED

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Liliana Andrade
Signature of an officer or director

President
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Liliana Andrade
Signature of Registered Agent

01-31-2011
Date

If signing on behalf of an entity:

LILIANA ANDRADE
Typed or Printed Name