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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Islamorada Sunset Investments Inc Name of Corporation	
DOCUMENT NUMBER: P00000113098	
The enclosed Statement of Change of Registered (Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Donald Zinner	
Name of Contact Person	
Islamorada Sunset Investments Inc	
Firm/Company	
PO Box 608	
Address	
Islamorada FL 33036	
City/State and Zip Code	
zinnman@comcast.net	
E-mail address: (to be used for future annual r	report notification)
For further information concerning this matter, plo	ease call:
Donald Zinner	at (305)393-1009
Name of Contact Person	at (305)393-1009 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

		ion organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.	
. The name of	the corporation: Islamorada Suns	set Investments Inc	
. The principal	office address: PO Box 608 Isla	morada FL 33036	
. The mailing a	address (if different):		
l. Date of incoη	poration/qualification: 12/11/200	Document number: P00000113098	
	d street address of the current re timent of State: (If resigned, ent	gistered agent and registered office on file with the er resigned)	
	Wayne Rassner		
	7700 N Kendall Drive, Stc 510		
	Miami FL 33176		
(if changed):	Donald Zinner	tered agent (if changed) and /or registered office	
	82509 Old Highway		
		P.O. Box NOT acceptable	
	Islamorada, Fl. 33036		
he street address changed will	ess of its registered office and t be identical.	he street address of the business office of its registered agent,	
uch change wa uthofized by U	s authorized by resolution dulie board, or the corporation has	y adopted by its board of directors or by an officer so s been notified in writing of the change.	
$\mathcal{A}\mathcal{A}$		Donald Zinner P D Printed or typed name and title	
1 / 51	re of an officer or director		
further agree f my duties, an ocument is bei orporation has	to comply with the provisions of d I am familiar with and accep my filed merely to reflect a cha spect mytified in writing of thi.	agent and agree to act in this capacity of all statutes relative to the proper and complete performance of the obligation of my position as registered agent. Or, if this inge in the registered office address, I hereby confirm that the s change.	
		4/26/21	
	nature of Egisteral Agent	Dute	
signing on be	half of an entity:		
1	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (04/13)

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