P09000044830

(Requestor's Name)				
(Ac	dress)			
(Address)				
(Ci	ty/State/Zip/Phone #	<i>f</i>)		
PICK-UP	WAIT	MAIL		
(Bı	ısiness Entity Name)		
•				
(Do	ocument Number)			
Certified Copies	Certificates o	f Status		
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Special Instructions to Filing Officer:				
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Office Use Only



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RAChange There is 8-12-09

COVER LETTER

Amendment Section

TO:

Division of C	orporations						
SUBJECT:	SOUTHEAST SUNRIS		_				
	Name of C	Corporation					
DOCUMENT NUMI	BER: P09	000044830					
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:							
	,	B -					
	SHAILESH	LIMBACHIA entact Person	_				
	name of Co	mtact Person					
SOUTHEAST SUNRISE HOLDINGS, INC.							
	Firm/C	ompany					
		YER LANE	SEC	2009 AUG -3			
	Add	lress	≱≋	2			
			AS	G I			
•	LAKE MARY, FL 32746						
City/State and Zip Code				AM 8: 00			
			107 118	ထ္			
	mail address: (to be used for	future annual report notification	지 공유	8			
L-	man address. (to be used for i	ruture armuar report normeactori	<i>)</i>				
For further information concerning this matter, please call:							
SHAIL	ESH LIMBACHIA	at (407) 76	5-9363				
SHAILESH LIMBACHIA at (407) 765-9363 Name of Contact Person Area Code & Daytime Telephone Number							
Enclosed is a \$35.00 check made payable to the Department of State.							
	Malling Addison.	Cémané à didusor:					
	Mailing Address: Amendment Section	Street Address: Amendment Section					
	Division of Corporations Division of Corporations						
	P.O. Box 6327 Clifton Building						

2661 Executive Center Circle

Tallahassee, FL 32301

RECEIVED

Tallahassee, FL 32314



Division of Corporations

August 4, 2009

SHAILESH LIMBACHHIA 2570 DWYER LANE LAKE MARY, FL 32746

SUBJECT: SOUTHEAST SUNRISE HOLDINGS INC

Ref. Number: P09000044830

We have received your document for SOUTHEAST SUNRISE HOLDINGS INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 409A00026561

SECRETARY OF STATE TALLAHASSEE, FLORIOA

2009 AUG 10 AM 8: 00

RECEIVED

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

	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organi		
	r to change its registered office or registe		
	the corporation: SOUTHEAST SU		
2. The principal	office address: 2570 DWYER LAN	E, LAKE MARY, FL 327	<u>′46</u>
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 05/21/09	Document number:	P09000044830
	d street address of the current registered age rtment of State: (If resigned, enter resigned	-	e with the
	ARUN MOOLJEE		
	2570 DWYER LANE		8
	LAKE MARY, FL 32746		OS AUG 10
6. The name and (if changed):	d street address of the new registered agen	at (if changed) and /or registered	Toffice ASSEE, FLC
	SHAILESH LIMBACHIA	,	— F. 8. 1
	2570 DWYER LANE		A Richard
	P.O. Box NO	Γ acceptable	
	LAKE MARY, FL 32746		
The street address changed will	ess of its registered office and the street lbe identical.	address of the business office	of its registered agent,
Such change wanthorized by	as authorized by resolution duly adopted he poard, or the corporation has been no	I by its board of directors or by tified in writing of the change	y an officer so
Signatu	ire of an officer or director	SHAILESH LIME Printed or typed name:	BACHIA VP
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent an to comply with the provisions of all stat nd I am familiar with and accept the obl ing filed merely to reflect a change in th s been notified in writing of this change.	d agree to act in this capacity utes relative to the proper and igation of my position as regis e registered office address, I h	complete performance stered agent. Or, if this sereby confirm that the
	Jun'	7/29/09	9
,	nature of Registered Agent	Date	
If signing on be	ehalf of an entity:		
	ALESH LIMBACHIA		

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