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(Re	equestor's Name)			
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(Cit	ty/State/Zip/Phone	e #)		
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COVER LETTER

TO:

Amendment Section Division of Corporations

Total Sunset, Inc.

Name of Corporation

P93000022613

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:

Carmen Fanego

Name of Contact Person

TotalBank

Firm/Company

100 SE 2nd Street, 32nd Floor

Address

Miami, FL 33131

City/State and Zip Code

cfanego@totalbank.com

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

For further information concerning this matter, please call:

Carmen Fanego

,305

476-6269

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of char	nge is submitted for a c	orporation organized u	7.1508, or 617.1508, Florida inder the laws of the State of gent, or both, in the State of	Florida	
1. The name of th	ne corporation: Total	Sunset, Inc.		<u>.</u>	
2. The principal of	400 0	E 2nd Street, 32i	nd Floor		
	Miami	, FL 33131			
3. The mailing ad	ldress (if different):				
4. Date of incorp	oration/qualification: _	3/25/1993	Document number: P9300	00022613	
	street address of the cument of State: (If resig		and registered office on file v	vith the	
-	Carmen Fanego			_	
_	2828 Coral Way, Suite 530				
_	Miami, FL 3314	5		SEP THE	
6. The name and (if changed):	street address of the ne	ew registered agent (if o	changed) and /or registered o	ffice 12 M 5: 12	
-	Carmen Fanego			- 2	
_	100 SE 2nd Street, 32nd Floor				
	Miami, FL 3313	P.O. Box NOT accepta	ble		
-				-	
The street address as changed will I	ss of its registered office identical.	ce and the street addre	ss of the business office of i	ts registered agent,	
Such change was authorized by the	s authorized by resolute board, or the corpora	ion duly adopted by its tion has been notified	s board of directors or by an in writing of the change.	officer so	
Carmen Fanego, VSD Signature of an officer of director Printed or typed name and title					
I hereby accept to I further agree to performance of agent. Or, if this hereby confirm to	the appointment as rego comply with the prov ny duties, and I am far s document is being fil hat the corporation ha	ristered agent and agre visions of all statutes re niliar with and accept ed merely to reflect a c us been notified in writ	ee to act in this capacity. clative to the proper and con the obligation of my positio change in the registered offi ing of this change.	nplete n as registered ce address, I	
_(/WMSigna	M + My ature of Registered Agent	<u>Ø</u>	8/18/14 Date		
If signing on beh	alf of an entity:				
Туј	ped or Printed Name		•		

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