P95000038177

(Re	questor's Name)						
•	,						
(Ad	dress)						
(Ad	dress)						
(City/State/Zip/Phone #)							
PICK-UP	MAIT	MAIL					
(Bu	siness Entity Nar	ne)					
(Do	cument Number)						
(40	· · · · · · · · · · · · · · · · · · ·						
Certified Copies	_ Certificates	of Status					
Special Instructions to	Filing Officer:						

Office Use Only



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01/04/08--01020--022 **35.00







COVER LETTER:

TO: Amendment Section Division of Corporations —								
Florida Sun Int'l Realty Inc. P.O. Box 2273 Ft. Lauderdale, FL 33303								
SUBJECT: (Name of Corporation)								
DOCUMENT NUMBER:								
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:								
Florida Sun lut'L Nealty luc- (Firm/Company)								
(Address)								
(Address)								
Ft. Landerdale, FL J 37 vJ (City/State and Zip Code)								
For further information concerning this matter, please call:								
<u>.</u>								
(Name of Contact Person) at (954) 761-9628 (Area Code & Daytime Telephone Number								
(Maine of Contact Felson) (Mea Gode & 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 chang	ge is submitted fo	ms 607.0502, 617. or a corporation of istered office or re	rganized und	er the laws of	the State of _	Flon	da
1. The name of the	e corporation:	Florida	Sun	luit L	neal	ty In	· c.
2. The principal o	ffice address:	120 E.	024	Land 224	Park 1	(6-0.	# (05
0241	and Pa	-4, FL	7 1	<u> 7, L 2</u>			
3. The mailing add	dress (if different):					
4. Date of incorpo	oration/qualification	on: 05/12/1	995 Do	cument numb	per:	9500	003817
5. The name and s Florida Departr	nent of State:	he current register		•			
_	Lawre	uce M	. 44.	emsia	E(q.		
_	1860	Fourt	lt: ll	Blva.	# 20	٥ - يما ,	
-	Mark	Fourt Palm 1	Beach	¥L 3	3406	SECRA) }
6. The name and s (if changed):	street address of the	he new registered	agent (if char	nged) and /or	registered off	TT	FILED
-	41	Vurmi (P.O. Box NOT accep	o ca oce	<u>ر ،</u>		STATE LORIDA	•
_							;
_	F+.	Larde	dale,	FL 3	7301		
The street addres as changed will b	s of its registered be identical.	l office and the st	reet address	of the busine	ss office of i	ts registered	agent,
Such change was authorized by the	authorized by reboard, or the co	esolution duly add rporation has bee	opted by its ben notified in	oard of direct writing of th	ctors or by an e change.	officer so	
(Signature	of an officer or director	J or)		Lans P	. Voしにr typed name and	tille)	PRr.
I hereby accept the I further agree to of my duties, and document is bein corporation has been	he appointment a comply with the I am familiar wi g filed merely to been notified in v	is registered ager provisions of all ith and accept the reflect a change vriting of this cha	nt and agree statutes rela obligation of in the registe ange.	to act in this tive to the pr of my position red office ad	capacity. coper and con n as registere ldress, I here	nplete perfoi ed agent. Or by confirm to	rmance ; if this hat the
- Give (Sign	A	enti		Rec	7 (Date)	200	7
If signing on beh							
-	13/A						
(Ту	ped or Printed Name)						

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