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COVER LETTER

TO: Registration Section

INHS18 (2/14)

Division of Corporations Sandhouse MB, LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Rachel Gerstein Name of Person Sandhouse MB, LLC Firm/Company 820 Arthur Godfrey Rd., Suite #201 Address Miami Beach, Florida 33140 City/State and Zip Code rachel@rlgla.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Rachel Gerstein 323 854 7092 Area Code & Daytime Telephone Number Name of Person STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: **☑** \$25 Filing Fee □ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

	me of the limited liability company:			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 820 Arthur Godfrey Rd., Suite #201			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) hur Godfrey Rd., Suite #201
	Miami Beach, FI 33140	_	Miami E	Beach, Fl 33140
	July 27, 2017		L170001	60138
3.	Date of filing/registration in Florida	 4.	-	Document number
5. (a)	Registered Agent and Registered Office shown on the records of Adler Wellikoff, PLLC	the Flori	da Dept. of Sta	
	Registered Office Address (MUST BE FLORIDA STREET) 1300 N. Federal Highway, #107	ADDRE.	<u>SS)</u>	2010 HAY 2
	Boca Raton , FL	3343	32	HAY 24 PH 4: 32 ARY OF STAIL ARASSET, FI ORID
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office s	oddress:	PH 4: 32 COFSIAIL EF. FLORIDA
	Rachel L. Gerstein			
	NEW Registered Office Address: 820 Arthur Godfrey Rd., Suite #201			_
	Miami Beach	3314	0	
the cha agent v was/we the arti	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	f the repaid the limited limited from the limited from th	gistered offic company, it mited liabili	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany. erstein
	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address. I I in writing of this change.	ree to a perfor d for in hereby	ct in this cap mance of my Chapter 60 confirm thai	pacity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been

Signature of Registered Agent