

**L06000038287**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**FILED**  
2009 JUN 25 PM 4:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**  
MAY 19 2009  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sand Solutions Limited  
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:

Travis S. Watson

Name of Person

Sand Solutions Limited

Firm/Company

8461 Lake Worth Road, Suite 252

Address

Lake Worth, FL 33467

City/State and Zip Code

travis@sand-llc.com

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

For further information concerning this matter, please call:

Travis S. Watson

Name of Person

at ( 561 )

839-1918 x1151

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 19, 2009

TRAVIS S. WATSON  
SAND SOLUTIONS LIMITED  
8461 LAKE WORTH RD., STE. 252  
LAKE WORTH, FL 33467

SUBJECT: SAND SOLUTIONS LIMITED CO.  
Ref. Number: L06000038287

We have received your document for SAND SOLUTIONS LIMITED CO. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 409A00017024

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

*Pursuant to the provisions of sections 608.416 or 608.508, 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.*

1. Name of the limited liability company: Sand Solutions Limited Co.

2. (a) Principal office address of limited liability company: \_\_\_\_\_

☒ \_\_\_\_\_

(Note: **MUST BE STREET ADDRESS**)

8461 Lake Worth Road, Suite 252  
Lake Worth, FL 33467

(b) Mailing address of limited liability company: \_\_\_\_\_

☒ \_\_\_\_\_

(Note: **MAY BE POST OFFICE BOX**)

8461 Lake Worth Road, Suite 252  
Lake Worth, FL 33467

4/12/2006

L06000038287

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Corporation Service Company

Registered Office Address:

1201 Hays Street  
Tallahassee FL 32301  
US

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

Travis Watson

**NEW** Registered Office Address:

3614 Old Lighthouse Circle

(**MUST BE FLORIDA STREET ADDRESS**)

Wellington, FL 33414

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Travis S. Watson  
Signature of a member or authorized representative of a member

Travis S. Watson

Printed or typed name of signer

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Travis S. Watson  
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00

FILED  
2009 JUN 25 PM 4:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA