L0700016073

F	ROM: (PLEASE PRINT) PHONE (\$50) 831-7666		
_	GANDOLLAR SERVICES LLC		
	1209 ALEPORT 120 #10		
-	Destin FL 32541		
(City/State/Zip/Phone #)			
	PICK-UP WAIT MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
	$D_{\mathcal{B}}$		



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07 OCT -5 PM 2: 14
SECRETARY OF STATE

Office Use Only

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Spen Soll and Services UC (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:			
Stephen Blacknell (Name of Person) SANDOUAR SELEVICES W (Firm/Company) 1709 AURPORT Ro #10 (Address) Destin H 32541 (City/State and Zip Code)	07 OCT -5 PH 2: 14 SECRETARY OF STATE TALLAHASSEE. FLORIDA		
For further information concerning this matter, please call:			
Stephen Bracknell at (850) 837-7666 (Name of Person) (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

September 26, 2007

SANDOLLAR SERVICES, LLC 1209 AIRPORT RD., #10 DESTIN, FL 32541

SUBJECT: SANDOLLAR SERVICES, LLC

Ref. Number: L07000016073

07 OCT -5 PM 2: 14
SECRETARY OF STATE
TALL AHASSEE FLORIDA

We have received your document for SANDOLLAR SERVICES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6984.

Deborah Bruce Document Specialist

Letter Number: 707A00056476

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

4 • • •
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. The name of the limited liability company is: <u>SANDOLLAR SERVICES LLC</u>
2. The mailing address of the limited liability company is: 1209 AIRPORT RID # 10
Destin 4 32541
7eb. 13, 2007 L070000 16073
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Justin R. Durst
Stephen Brackness = I
Name 1309 ALR PORT RD #10 Florida street address (P.O. Box NOT acceptable)
Destin FL 32541
City, State and Zip
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.
(Signature of a member or authorized representative of a member)
Stephen Brack nell (Printed or typed name of signee)
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.
(Signature of Registered Agent)

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