

LD7000097674

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(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

T. CLINE

JAN - 9 2009

EXAMINER

LD7-97674

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SANDAL-FLIP
(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:

JACKY VAN VELDHOUEN
(Name of Person)

SANDAL-FLIP-INTERNATIONAL LLC
(Firm/Company)

1660 JEWEL BOX AVE
(Address)

NAPLES - FL - 34102
(City/State and Zip Code)

2009 JAN -8 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

JACKY VAN VELDHOUEN at (239) 8793-8845
(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

**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: SANDAL-FLIP INTERNATIONAL L.L.C

2. (a) Principal office address of limited liability company: 1660 JEWEL BOX AVE
(Note: MUST BE STREET ADDRESS)

NAPLES - FL - 34102

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

1660 JEWEL BOX AVE

NAPLES - FL - 34102

9-19-2007

3. Date of filing/registration in Florida

4. Document number

26-141392

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

Registered Agent:

Biz Filling

Registered Office Address:

8040 EXCELSIOR DR. # 200

MADISON WI 53717

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

NEW Registered Agent:

JACKY VAN VELDHOUEN

NEW Registered Office Address:

1660 JEWEL BOX AVE

(MUST BE FLORIDA STREET ADDRESS)

NAPLES FL 34102

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.

Elsa Cantoni

(Signature of a member or authorized representative of a member)

ELSA CANTONI

(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]

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00