

109000029813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

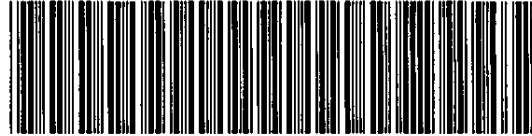
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

K. SALY

OCT - 3 2016

**LLW****LEWIS
LONGMAN
WALKER**Attorneys at Law
llw-law.com*Reply to: Bradenton*

September 26, 2016

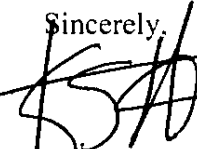
Florida Department of State
Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314**Re: REGISTERED AGENT/REGISTERED OFFICE CHANGE – THREE
SANDY TOES, LLC**

Dear Sir or Madam:

Enclosed for filing please find the Registered Agent/Registered Office Change for THREE SANDY TOES, LLC, along with check No. 9417 in the amount of \$25.00 for the associated filing fees.

If you have any questions concerning the enclosed information, please do not hesitate to contact my office at (941) 708-4040.

Sincerely,


Kevin S. HennessyKSH/cej
Enclosures
cc: Client**JACKSONVILLE**245 Riverside Ave., Suite 150
Jacksonville, Florida 32202

T: 904.353.6410

F: 904.353.7619

TALLAHASSEE315 South Calhoun St., Suite 830
Tallahassee, Florida 32301

T: 850.222.5702

F: 850.224.9242

TAMPA BAY101 Riverfront Blvd., Suite 620
Bradenton, Florida 34205

T: 941.708.4040

F: 941.708.4024

WEST PALM BEACH515 North Flagler Dr., Suite 1500
West Palm Beach, Florida 33401

T: 561.640.0820

F: 561.640.8202

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Three Sandy Toes, LLC
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:

Kevin S. Hennessy, Esq.

Name of Person

Lewis, Longman & Walker, P.A.

Firm/Company

101 Riverfront Boulevard, Suite 620

Address

Bradenton, FL 34205

City/State and Zip Code

khennessy@llw-law.com

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

For further information concerning this matter, please call:

Kevin S. Hennessy, Esq. at 941 708-4040

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 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.

1. Name of the limited liability company: Three Sandy Toes, LLC

2. (a) 1902 4th Street West (b) Same as Principal office

Principal office address of limited liability company:

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

Palmetto, FL 34221

Mailing address of limited liability company:

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

March 24, 2009

L09000029813

3. Date of filing/registration in Florida

4. Document number

5. (a) Corporate Creations Network, Inc.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

11380 Prosperity Farms Road

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

#221E

Palm Beach Gardens, FL 33410

(b) Kevin S. Hennessy, Esq.

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

Lewis, Longman & Walker, P.A.

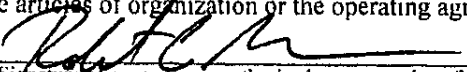
NEW Registered Office Address:

101 Riverfront Boulevard, Suite 620

Bradenton, FL 34205

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TALLAHASSEE, FL 09101

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

Robert C. Gause

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 605, 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