

**L10000016586**

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

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

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

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

☐ PICK-UP

☐ WAIT

☐ MAIL

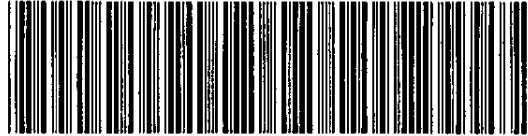
\_\_\_\_\_  
(Business Entity Name)

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

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FILED  
2015 AUG 26 PM 2:19  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

W. Gulliford AUG 27 2015

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sandestin Real Estate of NW Florida, 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:

Thomas Becnel

Name of Person

Sandestin Investments, LLC

Firm/Company

9300 Emerald Coast Pkwy W

Address

Miramar Beach, FL 32550

City/State and Zip Code

kristincloud@sandestin.com

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

For further information concerning this matter, please call:

Kristin Cloud

Name of Person

at (850) 267-8766

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

*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.*

FILED  
2015 AUG 26 PM 2:19  
SHERIFF OF STATE  
TALLAHASSEE, FLORIDA

INHS18 (2/14)