

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000034848

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** SANDLAKE MOUNTAIN LLC

**Current Principal Place of Business:**

6220 S ORANGE BLOSSOM TRAIL  
604  
ORLANDO, FL 32809 US

**New Principal Place of Business:**

6220 S ORANGE BLOSSOM TRAIL  
SUITE 600  
ORLANDO, FL 32809 US

**Current Mailing Address:**

6220 S ORANGE BLOSSOM TRAIL  
604  
ORLANDO, FL 32809 US

**New Mailing Address:**

6220 S ORANGE BLOSSOM TRAIL  
SUITE 600  
ORLANDO, FL 32809 US

**FEI Number:** 45-0955190

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAFETY BUSINESS LLC  
6220 S ORANGE BLOSSOM TRAIL  
604  
ORLANDO, FL 32809 US

**Name and Address of New Registered Agent:**

SAFETY BUSINESS LLC  
6220 S ORANGE BLOSSOM TRAIL  
SUITE 600  
ORLANDO, FL 32809 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CRISTINA RIVERA

04/25/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PAZ, ALEJANDRO M F  
Address: 6220 S ORANGE BLOSSOM TRAIL 604  
City-St-Zip: ORLANDO, FL 32809 US

Title: MGR  
Name: BLUE CHIP CONSULTING CORP  
Address: MARCY BUILDING 2ND FLOOR PURCELL ESTATE  
City-St-Zip: ROAD TOWN, TO 2614 VI

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALEJANDRO M F PAZ

MGR

04/25/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date