13000058872

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Ong. Mars add to					
New PO BOX -					
Ohs. Mars add-to New Po Box - Par Cheryl. Am					





800301494808

07/20/17--01020--010 **25.00

SELANCIARY OF SHALL DIVISION OF CORPORATION

M. MILLIGAN AUG 0 3 2017

į	COVER LETTER					
_	gistration Section vision of Corporations					
SUBJECT:	Sansburys Holdings LLC					
	Name of Limited Liability Company					
Dear Sir or	Madam:					
The enclose	ed Registered Agent/Registered Offi	ce Change and fe	e(s) are submitted for filing.			
Please retur	n all correspondence concerning thi	s matter to the fol	lowing:			
Cheryl Co	ollin					
	Name of Person	,				
Sansbury	s Holdings LLC					
	Firm/Company	4 ·				
PO Box 3	031					
	Address					
Palm Bea	ch, FL 33480					
	City/State and Zip Code					
misschery	/l72@yahoo.com					
E-mail	address: (to be used for future annu	ual report notifica	tion)			
For further i	information concerning this matter,	please call:				
Cheryl Co	llin	561	429-8477			
	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		Regis Divis P.O. I	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:						
□ \$	325 Filing Fee	□ \$55	☐ \$55 Filing Fee & Certified Copy			

INHS18 (2/14)

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. Na	me of the limited liability company: Sansburys Hol	ding	s LLC	
2. (a)		_	(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) PO Box 3031 Palm Beach, FL 33480	
	327 Dyer Road	_		
	West Palm Beach, FL 33405	_		
	4/23/2013		L130000	58872
3.5. (a)	Date of filing/registration in Florida Cheryl Collin - Mgr	4.		Document number
(Registered Agent and Registered Office shown on the records of the Jules Franco - Registered Agent	e Flor	ida Dept. of Stat	 te:
	Registered Office Address (MUST BE FLORIDA STREET AL 327 Dyer Road	DDRI	DIVIS	
	West Palm Beach , FL	340	5	DUL 20
(b)	Enter name of NEW Registered Agent and/or NEW Registered C	Office	address:	AMID: 46
	NEW Registered Office Woldress: West Palm Back, FL	3	340S	_
the cha agent v was/we	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liable.	he re pility the l imite	gistered offic company, it i imited liabili	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in appany.
Signa	ture of a member or authorized representative of a member	-		Printed or typed name of signee
provisi the obl to merc	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I ho I in writing of this change.	e to e erfoi for i ereby	act in this cap rmance of my n Chapter 60. r confirm that	pacity. I further agree to comply with the duties, and I am Jamiliar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been

Signature of Registered Agent