113000091583

(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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TO:	Registration Section Division of Corporations						
SUBJ	ECT:Sandy Acquisitions, LLC						
	Name of Limited Liability Company						
Dear S	Sir or Madam:						
The cr	nclosed Registered Agent/Registered Off	fice Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning th	is matter to the	following:				
Sand	Ira Wiseman						
	. Name of Person						
Sand	y Acquisitions LLC						
	Firm/Company	***************************************					
РО В	ox 1896						
	Address		_				
Saras	sota, FL 34230						
	City/State and Zip Code						
sand	yacquisitions@outlook.com						
H	E-mail address: (to be used for future and	nual report notif	ication)				
For fu	rther information concerning this matter	, please call:					
Sand	ra Wiseman	941 at (284-5014				
	Name of Person		Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS:	MA	AILING ADDRESS:				
	Registration Section		gistration Section				
	Division of Corporations		vision of Corporations				
	Clifton Building		D. Box 6327				
	2661 Executive Center Circle Tallahassee, Florida 32301	I a.	llahassee, Florida 32314				
	Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	□ \$5	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. Na	ame of the limited liability company: Sandy Acquis	itions, LL	.C	
2. (a)	1350 Main Street, #709, Sarasota, FL 34236		PO Box 1896, Sar	asota, FL 34230
2. (u,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	6/26/13		13000091583	
3.	Date of filing/registration in Florida	4.	Document n	number
5. (a)	Sandra Wiseman			
	Registered Agent and Registered Office shown on the records of t		ept. of State:	
	1751 Mound Street, #201, Sarasota, FL 34236			
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)		
			<u> </u>	
	, FL			
(h)	Sandra Wiseman			
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			
	1350 Main Street, #709, Sarasota, FL 34236			SSET OF THE PARTY
	NEW Registered Office Address:			T-2 PM 4: 22 HASSEF FLORIDA
	, FL			
the cha agent v was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the register ability come of the limited limited lia	red office and the bus pany, it is hereby con ed liability company o bility company.	siness office of the registered firmed that the change(s)
	undia Wisemen	Sand	ra Wiseman	
_	ture of a member or authorized representative of a member			ped name of signee
provis. The obl to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided elv reflect a change in the registered office address, I is din writing of this change.	ee to act ir performan d for in Ch hereby con	this capacity. I furth ce of my duties, and I apter 605, F.S. Or, if firm that the limited li	ner agree to comply with the am familiar with and accept this document is being filed iability company has been
\gg_c	ndia Wiseman			

Signature of Registered Agent