L15000084098

(Requestor's Name)				
(Address)				
(Address)				
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE ALLAHASSEE, FLORIDA 2016 DEC -5 P

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2016

SANDALWOOD PROPERTY MANAGEMENT, LLLC 2060 HWY A1A, SUITE 303 INDIAN HARBOUR BEACH, FL 32937

SUBJECT: SANDALWOOD PROPERTY MANAGEMENT, "LLC"

Ref. Number: L15000084098

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 316A00024074

FILED

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:	Name of the limited liability company: SANDALWOOD PROPERTY MANAGEMENT LLC				
2. (a) 2060 HWY A1A SUITE 303		(b)			
Principal office address of limited li (Note: MUST BE STREET)		<u> </u>	Mailing address of limite		
INDIAN HARBOUR BEACH	<u>ADDKESS</u>)		(Note: MAY BE POS	I OFFICE BOX)	
FLORIDA 32937					
05/12/2015		L1500008	4098		
3. Date of filing/registration i	n Florida 4.		Document number		
5. (a) PEI VENTURES LLC					
Registered Agent and Registered Office sho	wn on the records of the Flo	rida Dept. of State	:		
Registered Office Address (MUST BE)	FLORIDA STREET ADDR	ESS)			
2060 HWY A1A SUITE303					
INDIAN HARBOUR BEACH	, FL_3293	37			
(b) Enter name of <u>NEW Registered Agent</u> and	Vor NEW Degistered Office	address	#		
Enter hante of MEW Registered Agent and	of NEW Registered Office	audi ess.	SEC SEC	2016	
LISE KEALEY			ECRETAR) LAHASSI		
NEW Registered Office Address:			SSE	-5	
2060 HWY A1A SUITE 303			me	<u>v</u> <u>m</u>	
INDIAN HARBOUR BEACH	, FL_3293	37	STATE	D 2: 52	
If the limited liability company is not organ the change or changes are made, the Florida agent will be identical. Or, in the case of a was/were authorized by an affirmative vote the articles of organization or the operating	a street address of the re Florida limited liability of the members of the	egistered office company, it is limited liability	and the business of hereby confirmed t	nfirmed that after	
- When		ISE KEALE			
Signature of a member of additional representative			Printed or typed name of		
I hereby accept the appointment as registe provisions of all statutes relative to the pro the obligations of my position as registered to merely reflect a change in the registered notified in writing of this change.	red agent and agree to per and complete perfo agent as provided for office address, I hereb	act in this cape rmance of my e in Chapter 605 y confirm that i	icity. I further agre luties, and I am fam , F.S. Or, if this doc the limited liability o	e to comply with the iliar with and accept cument is being filed company has been	
Signature of Registered Agent				になる。	
	oorations• P.O. Box 6. FILING FEE: \$		see, FL 32314		