L15000185514

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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Do	ocument Number)				
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SALLAHASSEE FLORIDA



COVER LETTER

Division of Corporations	•
Sandart, LLC	
	e of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Jayachandra Reddy	
Name of Person	
Sandart, LLC	
Firm/Company	,, , , , , , , , , , , , , , , , , , ,
8212 Lakeview Dr	
Address	·
West Palm Beach, FL 33412	
City/State and Zip Code	
jay.reddy@sandart-llc.com	
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matter,	please call:
Jay Reddy	858 876-4416 at ()
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	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

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.

Na	me of the limited liability company:	.C		
	8212 Lakeview Dr	(l	8212 Lakeview Dr	
(ω)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(c	Mailing address of limited liab (Note: MAY BE POST OF	
	West Palm Beach, FL 33412		West Palm Beach, FL 33412	
	Nov 02, 2015		L15000185514	
(a)	Date of filing/registration in Florida INCORP SERVICES Inc	4.	Document number	
(a)	Registered Agent and Registered Office shown on the records of 17888 67th Court North	of the Florida	la Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	Z Z	16 81
	Loxahatchee, I	33470 FL) MASS	SEP 20
(b)	Jayachandra Reddy		me me	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> 8212 Lakeview Dr	ed Office ad	ddress:	
	NEW Registered Office Address:		<u> </u>	
	West Palm Beach	33412	2	
cha nt w s/we	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the company	of the regi liability co s of the lin he limited	gistered office and the business office company, it is hereby confirmed that to mited liability company or as otherwise.	of the registe the change(s)
gnat	ture of a member or authorized representative of a member		Printed or typed name of sign	nee
visi obl nere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as providely reflect a change in the registered office address, if in writing of this change.	igree to ac te perform ded for in (I hereby c	ct in this capacity. I further agree to a nance of my duties, and I am familiar Chapter 605, F.S. Or, if this docume confirm that the limited liability comp	comply with to with and acc ont is being fil wany has been