115000 209 2560

(Requestor's Name)
(Address)
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(Marioso)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
Coomico India, reems,
(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporations		
1 Sandpiper, LLC SUBJECT:		
	Limited Lia	ability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office C	hange and	fee(s) are submitted for filing.
Please return all correspondence concerning this ma	itter to the I	following:
Kevin D. Israel		
Name of Person		_
Venture Law Firm		
Firm/Company		_
6409 Fayetteville Road, Suite 120-188		
Address		_
Durham, North Carolina 27713		
City/State and Zip Code		_
kisrael@venturelawnc.com		
E-mail address: (to be used for future annual r	eport notiti	cation)
For further information concerning this matter, pleas	se call:	
Kevin D. Israel	919	213-1963
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	Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314
Enclosed is a check for the following amo	unt:	
☑ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy
INHS18 (2/14)		

STATEMENT OF CHANGE OF RÉGISTERED 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.

(11/		(h)	
, ,	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: \(\lambda \) Note: MAY BE POST OFFICE BOX\(\right)\)
	1 Sandpiper Lane	30	08 Arborhill Lane
	Marathon, FL 33050	H	olly Springs, NC 27540
	12/17/2015	L1:	5000209256
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
•	Registered Agent and Registered Office shown on the rec	ords of the Florida Dep	t, of State:
	Guy Moreau		
	Registered Office Address	<u>REET ADDRESS)</u>	
	10055 Overseas Hwy	<u> </u>	
	Marathon	_{in} 33050	- - : .
			> :
(b)	Enter name of NEW Registered Agent and/or NEW Reg		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Reg</u>	<u>cistered Office address</u>	6
	Emma Monroe		
	NEW Registered Office Address:		
	6975 Overseas Highway. #43		
	Marathon	. FL 33050	
the cha agent v was/we the arti	imited liability company is not organized under inge or changes are made, the Florida street addivil be identical. Or, in the case of a Florida limber authorized by an affirmative vote of the memoles of organization or the operating agreement	ress of the registere ited liability compa ibers of the limited of the limited liabi Kevin I	d office and the business office of the registere my, it is hereby confirmed that the change(s) -liability company or as otherwise provided in
C TA			rtined of Open hame of Signee

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Emma Meure

Signature of Registered Agent