16000004472

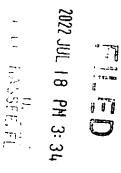
(Re	questor's Name)	
(Ad	dress)	
·		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
	siness Entity Name	<u></u>
(Du	isiness Entity Name	=)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
		
Special Instructions to	Filing Officer:	

Office Use Only



000390685310

07/18/22--01026--003 **25.00



COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Treasure Island Realty LLC				
	Name of Limited I	Liability Company		
Dear Sir or Madam:				
The enclosed Registered Agent/Registered	Office Change and	d fee(s) are submitted for filing.		
Please return all correspondence concerning	g this matter to the	e following:		
Jeffrey Sandler				
Name of Person				
The Adams Sandler Law Group				
Firm/Company				
37 N Orange Ave, Suite 500		ే ఆస్తా ——		
Address		₩ Mai Mick		
Orlando, FL 32801		f)		
City/State and Zip Coo	de			
info@adamssandlerlaw.com				
E-mail address: (to be used for future	annual report noti	fication)		
For further information concerning this ma	tter, please call:			
Jeffrey Sandler	at (407) 926-4144		
Name of Person		Area Code & Daytime Telephone Number		
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the follow	ing amount:			
■ \$25 Filing Fee	u :	☐ \$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. N	ame of the limited liability company: Treasure Island	Realty LL	С				<u></u>
2. (a)	145 108th Avenue, Suite 5	(b) 145 108th Avenue, Suite 5					
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)			
	Treasure Island, FL 33706		Treasure Is	land, FL 33706			
		<u>.</u>		.	 -		
	12/31/2015		L160000044	72			
3.	Date of filing/registration in Florida	4.		Document number	1	2022 JUL. 18	t : 150
5. (a	Registered Agent and Registered Office shown on the records of		a Dept. of State	:	} ·	<u></u>	
	Law Offices of Michael J. Heath, PA				3.5	8	.1220
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				Č. :	PH	171
	167 108th Ave				HASSEL TO	3: 34	
	Treasure Island F	ե <u>լ 33706</u>			- - -	F	
(b)	Enter name of NEW Registered Agent and/or NEW Registers The Adams Sandler Law Group	ed Office ac	ldress:				
	NEW Registered Office Address:						
	37 N Orange Avenue, Suite 500						
	Orlando µ	: _[] 32801					
chang agent was/w the art	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited latere authorized by an affirmative vote of the members icles of organization or the operating agreement of the Anthony Russang, Ir	ne register liability co of the lin e limited	ed office and ompany, it is nited liability liability com hony Russano	the business office hereby confirmed company or as oth pany. , Jr.	e of the that the nerwise	register change provide	red :(s)
				Printed or typed name	_		
I here provis the ob to men notifie	thy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I do not inviting of this change.	gree to ac. e perform led for in (I hereby c	t in this capa ance of my d Chapter 605, onfirm that th	city. I further agre uties, and I am fan F.S. Or, if this do he limited liability (re to con niliar wi cument compan	iply wi th and i is being v has b	th the accept g filed een
Signate	are of Veristered Agent						

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 F1LING FEE: \$25.00