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COVER LETTER

	Registration Section Division of Corporations	
SUBJEC	T: Oundpiper Investment Group, Lic Name of Limited Liability Company	
The enclo	osed Articles of Amendment and fee(s) are submitted for filing.	
Please ret	turn all correspondence concerning this matter to the following:	
	VINCENT FATTIZZI Name of Person	
	Sandpiper Investment Group LC Firm/Company	
	1093 AlA Beach Blvd, #257 Address	•
	Sount Augustine FL 32080 City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
\tilde{a}	er information concerning this matter, please call:	1
1201	Name of Person Area Code Daytime Telephone Number Area Code Daytime Telephone Number	
•	is a check for the following amount: 0 Filing Fee \$\sim \$\$30.00 Filing Fee & \$\sim \$\$55.00 Filing Fee & \$\sim \$\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TO ARTICLES OF ORGANIZATION OF

Sandpiper	Investment Group, LLC ed Liability Company as It now appears on our records.)
(Name of the Limite	(A Florida Limited Liability Company)
The Articles of Organization for this Limited Lia	ability Company were filed on $\frac{6/24/2016}{90}$ and assigned
This amendment is submitted to amend the follow	owing:
A. If amending name, enter the new name of	the limited liability company here:
The new name must be distinguishable and contain the wo Enter new principal offices address, if applica (Principal office address MUST BE A STREET)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE B	
B. If amending the registered agent and/o registered agent and/or the new registered off	or registered office address on our records, enter the filame of the new fice address here:
Name of New Registered Agent:	Saint Augustine Law Group, PA
New Registered Office Address:	Saint Augustine Law Group, PA 320 High Tide Dv. Ste 101 Enter Florida street address
	Saint Augustine , Florida 32080 City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent Signature of New Registered Agent

or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> Address Type of Action <u>Name</u> MGR 1093 AIA Beach Blvd, #257 DAdd Saint Augustine, FL 32080 Remove EricVFattizzi

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(If an ef Note:	tive date, if other than the date of filing: 8/10/2016 (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date when the date on the Department of State's records.	Pursuan vill not	t to 605.(be listed	0207 (d as t
:he re) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. of 90th day after the record is filed.	n the	earliei	r of:
Dated	AUGUST 10 2016			
Dated	August 10 2016			
Dated	August 10 2016 Signature of a member or authorized reproceduative of a member		_	
Dated				

Page 3 of 3

Filing Fee: \$25.00