

418000235298

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

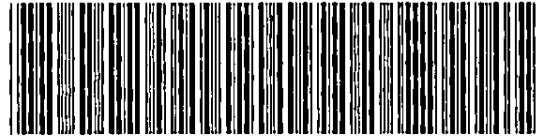
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300319456833

10/19/18--01015--014 **25.00

FILED
2018 OCT 19 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FL

*PA chg
LTS
10-30-18*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sinan Holdings LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher Frego
Name of Person

Sinan Holdings LLC
Firm/Company

130 Andora St
Address

Saint Augustine, Florida 32086
City/State and Zip Code

fregoch7@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Frego at (904) 599-2783
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

