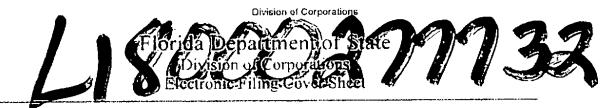
4/11/2019



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

The same of the sa

Account Number : 120010000062

Phone : (323)962-8600

Fax Number : (323)962-3889

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	SACANDAGA LLC				
SCDIII	Name	Name of Limited Liability Company			
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Offic	ce Change and f	ee(s) are submitted for filing.		
Please	return all correspondence concerning this	s matter to the f	ollowing:		
Chey	renne Moseley				
	Name of Person		_		
Lega	łzoom.com, Inc.				
	Firm/Company	_	_		
1011	N. Brand Blvd., 10th Floor				
	Address		_		
Glen	dale, CA 91203				
	City/State and Zip Code		_		
betsy	@ridenourreporting.com				
·	E-mail address: (to be used for future ann	ual report notifi	cation)		
For fu	rther information concerning this matter,	please call:			
Chey	venne Moseley	800 at (773-0888 ext 9724		
	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,C	AILING ADDRESS: gistration Section ision of Corporations). Box 6327 lahassee, Florida 32314		
	Enclosed is a check for the following	Enclosed is a check for the following amount:			
	□ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy		
INHSI	8 (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.

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