

L200000 40609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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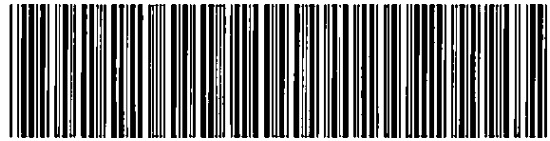
(Business Entity Name)

(Document Number)

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02/27/20--01021--029 **25.00

2020 FEB 27 AM 8:24

R. WHITE
MAR 10 2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAND LAKE CONSULTING LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN PICCIONE

Name of Person

SAND LAKE CONSULTING LLC

Firm/Company

1091 NE 3RD AV

Address

BOCA RATON, FL 33432

City/State and Zip Code

johnpiccione2@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN PICCIONE

Name of Person

at (630) 209 6525

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SAND LAKE CONSULTING LLC FILED 27 APR 8:24
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2/4/20 and assigned Florida document number L20000040609.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, **Florida** _____
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

MGR = Manager
AMBR = Authorized Member

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

ADD AUTHORIZED PERSON: JOHN PICCIONE MGR

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 2/26/2020, _____



Signature of a member or authorized representative of a member

JOHN PICCIONE

Typed or printed name of signee

[Florida Department of State](#)[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Detail By Document Number](#) /**Detail by Entity Name**

Florida Limited Liability Company
SAND LAKE CONSULTING LLC

Filing Information

Document Number L20000040609
FEI/EIN Number NONE
Date Filed 02/04/2020
State FL
Status ACTIVE

Principal Address

1091 NE 3RD AV
BOCA RATON, FL 33432

Mailing Address

1091 NE 3RD AV
BOCA RATON, FL 33432

Registered Agent Name & Address

PICCIONE, JOHN
1091 NE 3RD AV
BOCA RATON, FL FL

Authorized Person(s) Detail

NONE

MGR

Annual Reports

No Annual Reports Filed

Document Images

02/04/2020 Florida Limited Liability [View image in PDF format](#)