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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	ISLAND SAND LLC				
501771		Name of Limited Liability Company			
Dear Si	r or Madam:				
The end	closed Registered Agent/Registered	Office Change and	f fee(s) are submitted for filing.		
Please	return all correspondence concernin	ng this matter to the	following:		
Avri Be	n-Hamo				
	Name of Person				
Ben-Ha	mo Law, PLLC				
	Firm/Company				
2701 N	W 2nd Ave. Suite 207				
	Address		_		
Boca Ra	aton, FL 33431				
	City/State and Zip Co	de			
mydalis	alopez@hotmail.com				
E	-mail address: (to be used for future	annual report noti	fication)		
For fur	ther information concerning this ma	atter, please call:			
Myda L	opez	646 at (704-1834		
	Name of Person	ut \	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	ving amount:			
	■ \$25 Filing Fee		355 Filing Fee & Certified Copy		
INHS18	3 (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.

of limited liability company: BE POST OFFICE BOX
umber
202 SE
弱易而
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FILED M 9: 13 SERECULAR SEE STAT
9: 13 STATE E. FI.
reby confirmed that after is office of the registered firmed that the change(s) ir as otherwise provided in
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er agree to comply with t am familiar with and acc this document is being fil ability company has been
firm r as ed na er a am