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## **COVER LETTER**

O: Registration Section Division of Corporations	
SUNSHINE AND SANDALS, LLC SUBJECT:	
	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 m	
Jordan Lulich, Esq.	
Name of Person	
Lutich & Attorneys, P.A.	
Firm/Company	<del></del>
1612 20th Street	
Address	
Vero Beach, FL 32960	
City/State and Zip Code	
jordan@lulich.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ase call;
Jordan Lulich	772 589-5500
Name of Person	Arca Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, 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 following am	ount:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	<del>- '</del>

## 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.

I. Na	ame of the limited liability company:	SUNSHINE AND	SANDAL	S. LLC			
2. (a)	Principal office address of limited li (Note: MUST BE STREET.	iability company:	-96Z(b)	125 12	2+h St SE, Vero Mailing address of limite (Note: MAY BE POS	d liability company:	32962
3.	09/03/2021  Date of filing/registration in Benjamin R. Pauley	n Florida	4.	L 21	00039447 Document number	3	
5. (a)	Registered Agent and Registered Office sho	own on the records of th	e Florida I	Dept. of Stat	_ c:		
	Registered Office Address (MUST BE I	T BE FLORIDA STREET ADDRESS)			-	2021 NOV 15 AM 7: 08 SECRETARY OF STATE	T
	VERO BEACH  Jordan J. Lulich, Esq.	, FL 3	2962		-	15 M 7:08	
(b)	Enter name of NEW Registered Agent and	or <u>NEW Registered C</u>	Mice adde	<u></u> :	_	7: 08	هجيية
	NEW Registered Office Address: 1069 Main Street				_		
	Sebastian	, FL <sup>3</sup>	2958				
Igent was/we he article Signal I hereborovisic he obtion mere	mited liability company is not organ or changes are made, the Florida strail be identical. Or, in the case of a reauthorized by an affirmative vote cles of organization or the operating are of a mamber or authorized representative by accept the appointment as register ons of all standes relative to the propagations of propagation as registered by reflect a change in the registered in writing of this change.	Florida limited liab of the members of agreement of the lin	ility com the limite nited lia	pany, it is a liability bility com	the business office is hereby confirmed they company or as othe ipany.  Figure 1.6. They  Printed or typed name of	of the registered that the change(s) rwise provided in figure.	n
Signatur	e of Registered Agent		/ <b>*</b> * <b>-</b>	<b>.</b>			
	Division of Corp	orations• P.O. Bo FILING FEI	x 6327• E: \$25.00	Tallahas D	see, FL 32314		