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Division of Corporations Fax Number : (850)617-6383

From:

Account Name	:	REGISTERED AGENTS	INC.
Account Number	^ :	120090000081	
Phone	:	(307)200-2803	
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:			·••	2023			
1	Ph 3: 34	1. 108.01 1. 108.01	LLC REGISTERED AGENT CHANGE SANDIDEAS LLC			ні 23 Ын	- 11 i. D
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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,

N	ame of the limited liability company: <u>SANDIDEA</u>	0 220	
(a)		(b)	
	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)		Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BOX</u>)
	11/21/2022 Date of filing/registration in Florida	<u></u>	2000495253 Document number
(a)	UNITED STATES CORPORATION AGENT	S. INC.	
(,	Registered Agent and Registered Office shown on the records of		t. of State:
	476 RIVERSIDE AVE.		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	14 Store 22
			2023 x 23
	JACKSONVILLE , FI	32202	
(b)	Registered Agents Inc		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office address	
	7901 4th St N		2: 5 9
	NEW Registered Office Address:		
	STE 300		
	St. Petersburg	. 33702	

Robin poney

Robin Jones

Signature of a member or authorized representative of a member

Printed or typed name of signee

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.

David Roberts - Assistant Secretary

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00