L2400068512

(Requestor's Name)					
(Address)					
(Address)					
(Ci	ty/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
J. HORNE					
APR 1 5 2024					

Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Sandsational Cleaning LLC ECT:					
		Name of Limited Liability Company				
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Office Cl	hange and fee(s) are submitted for filing.				
Please	return all correspondence concerning this man	tter to the following:				
Maria C	Cisneros Gibson					
	Name of Person					
Sandsat	tional Cleaning LLC					
	Firm/Company					
1011 H	lopkins Lane					
	Address					
Southpo	ort, FL 32409					
	City/State and Zip Code					
sandsat	tionalcleaning@gmail.com					
E	E-mail address: (to be used for future annual re	eport notification)				
For fur	rther information concerning this matter, pleas	se call:				
Maria (Cisneros Gibsonat	850 640-9051				
	Name of Person	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 following amo	ount:				
	□ \$25 Filing Fee	■ \$55 Filing Fee & Certified Copy				

INHS18 (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.

1. N	ame of the limited liability company: Sandsational Clean	iing Li	.C	
2. (a)			(b)	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		. ,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1011 Hopkins Ln		1011 Hop	kins Ln
	Southport, FL 32409	_	Southport	, FL 32409
	02/06/2024		L24000068	512
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Cheyenne Moseley			. 2
5. (a)	Registered Agent and Registered Office shown on the records of the			
	United States Corporation Agents, Inc.			### ₹ m
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	<u>SS)</u>	27
	476 Riverside Ave			
	Jacksonville , FL	32202		ED PH 3: 50
	,1 L,		·-··	- 50 · 50
	Enter name of NEW Registered Agent and/or NEW Registered Maria Cisneros Gibson NEW Registered Office Address:	<u>Onice</u>		-
	1011 Hopkins Ln			_
	Southport, FL	32409		_
chang agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registe bility f the li	ered office ar company, it i imited liabili	nd the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in
		M	aria Cisneros	Gibson
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the ob to met	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address. I have a writing of this change.	ee to a perfor for ir ereby	ct in this cap mance of my a Chapter 60, confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signal	ure of Registered Agent			