

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000007860

Entity Name: SAND PHARMACY ORMOND BEACH 03227 LLC

Current Principal Place of Business:

10689 N PENNSYLVANIA STREET,
SUITE 100
INDIANAPOLIS, IN 46280

Current Mailing Address:

10689 N PENNSYLVANIA STREET,
SUITE 100
INDIANAPOLIS, IN 46280 US

FEI Number: 82-2207687

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MANAGER
Name SAND PHARMACY PORTFOLIO 2017
 LLC
Address 5725 N. SCOTTSDALE RD., SUITE C-
 195
City-State-Zip: SCOTTSDALE AZ 85250

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAY D. STEIN

MEMBER

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date