

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000106387

**Entity Name:** S A R FINANCIAL CONSULTING LLC

**Current Principal Place of Business:**

175 SW 7 STREET  
2109  
MIAMI, FL 33130

**Current Mailing Address:**

175 SW 7 STREET  
2109  
MIAMI, FL 33130 US

**FEI Number:** 90-0761129

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RODRIGUEZ, CESAR  
475 BRICKELL AVE  
UNIT #510  
MIAMI, FL 33131 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 MGRM  
Name ACOSTA DURAN, JOSE R  
Address 175 SW 7 STREET SUITE 2109  
City-State-Zip: MIAMI FL 33130

*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:** JOSE R ACOSTA DURAN

MGRM

04/25/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date