## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000040248

Entity Name: SAVERLINE, LLC

**Current Principal Place of Business:** 

2931 SUNRISE LAKES DR. E.

207

SUNRISE, FL 33322

**Current Mailing Address:** 

2931 SUNRISE LAKES DR. E. #207 17207

SUNRISE, FL 33322 US

FEI Number: 45-4862281 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CEDERNA, NICOLE 12610 SW 222 TERRACE MIAMI, FL 33170 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

**FILED** Feb 22, 2015

**Secretary of State** 

CC8095092841

Authorized Person(s) Detail:

Title MGR Title MGR

FUENTE, JOAQUIN D. Name Name ZAMORA, KARLA

Address 2931 SUNRISE LAKES DR. E Address 12610 SW 222 TERRACE

207

City-State-Zip: MIAMI FL 33170 SUNRISE FL 33322 City-State-Zip:

Title MANAGER Title MGR

Name FUENTE, ANDREW JC Name CEDERNA, NICOLE

2931 SUNRISE LAKES DR. E. Address 12610 SW 222 TERRACE Address 207

SUNRISE FL 33322 MIAMI FL 33170 City-State-Zip: City-State-Zip:

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.

Date