

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000074951

**Entity Name:** SAVIOR SANITY LLC

**Current Principal Place of Business:**

1931 NW 150TH AVENUE  
SUITE 233  
PEMBROKE PINES, FL 33028

**Current Mailing Address:**

1931 NW 150TH AVENUE  
SUITE 233  
PEMBROKE PINES, FL 33028

**FEI Number:** 90-0863713

**Certificate of Status Desired:** Yes

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

TEMPLE-WILES, BOBBIE  
833 SW 118TH TERRACE  
DAVIE, FL 33325 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            OWNER  
Name            TEMPLE-WILES, BOBBIE  
Address        833 SW 118TH TERRACE  
City-State-Zip: DAVIE FL 33325

*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:** BOBBIE TEMPLE-WILES

**MANAGER**

**01/31/2020**

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

\_\_\_\_\_  
Date