

2015 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: No

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 MGR
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 J TEMPLE-WILES

MANAGER

04/17/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date