

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000030309

**Entity Name:** SAS NUTRITION LLC

**Current Principal Place of Business:**

2431 ASBURY CIRCLE  
CAPE CORAL, FL 33991

**Current Mailing Address:**

2431 ASBURY CIRCLE  
CAPE CORAL, FL 33991 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

BENIGNI, SETH M  
2431 ASBURY CIRCLE  
CAPE CORAL, FL 33991 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 BENIGNI, SETH M  
Address 2431 ASBURY CIRCLE  
City-State-Zip: CAPE CORAL FL 33991

Title MGRM  
Name BENIGNI, ALYCIA J  
Address 2431 ASBURY CIRCLE  
City-State-Zip: CAPE CORAL FL 33991

*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:** SETH BENIGNI

**MGRM**

**02/12/2014**

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

\_\_\_\_\_  
Date