

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000107204

**Entity Name:** SATORI WATERS, LLC

**Current Principal Place of Business:**

3550 POWERLINE ROAD  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

3550 POWERLINE ROAD  
FORT LAUDERDALE, FL 33309

**FEI Number: 80-0949333**

**Certificate of Status Desired: No**

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

BRAZER, AYDA  
3550 POWERLINE ROAD  
FORT LAUDERDALE, FL 33309 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 REIMAN, BARRY  
Address 17100 ROYAL PALM BLVD., SUITE 1  
City-State-Zip: WESTON FL 33326

Title MGR  
Name HARRIS, RICK A  
Address 17100 ROYAL PALM BLVD., SUITE 1  
City-State-Zip: WESTON FL 33326

Title MGR  
Name BRAZER, AYDA  
Address 3550 POWERLINE ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title VP  
Name MICHAEL, DAVID  
Address 3550 POWERLINE ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title VP  
Name EWING, NANCY  
Address 3550 POWERLINE ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

Title SECRETARY  
Name BRAZER, JUDD  
Address 3550 POWERLINE ROAD  
City-State-Zip: FORT LAUDERDALE FL 33309

*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: JUDD BRAZER**

**SECRETARY**

**01/21/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date