

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000350950

**Entity Name:** SAGE NATURALS LLC

**Current Principal Place of Business:**

13808 SW 149TH CIRCLE LANE  
APT 4  
MIAMI, FL 33186

**Current Mailing Address:**

13808 SW 149 CIRCLE LANE  
# 4  
MIAMI, FL 33186

**FEI Number:** 86-3443381

**Certificate of Status Desired:** No

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

MEIMAND, SAGHI  
13808 SW 149 CIRCLE LANE  
# 4  
MIAMI, FL 33186 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 MEIMAND, SAGHI  
Address 13808 SW 149 CIRCLE LANE # 4  
City-State-Zip: MIAMI FL 33186

*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:** SAGHI MEIMAND

**MGR**

**05/01/2023**

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

\_\_\_\_\_  
Date