

LO1 0000008339

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 5, 2021

TIFFANY MARTINEZ
5835 BLUE LAGOON DR
STE 200
MIAMI, FL 33126

SUBJECT: SARA APPAREL, LLC
Ref. Number: L01000008339

We have received your document for SARA APPAREL, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 021A00004703



SANDLER, TRAVIS & ROSENBERG, P.A.
International Trade, Customs & Export Law

Tiffany Martinez, CP, FRP
Telephone: 305.894.1015
Email: tmartinez@strtrade.com

March 22, 2021

Octavia L. Simmons
Regulatory Specialist II Supervisor
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Sara Apparel, LLC
L01000008339


Dear Ms. Simmons:

As per your correspondence of March 5, 2021, please find attached the correct, completed Statement of Change of Registered Office or Agent or Both for Limited Liability Company for the above referenced company. Also attached is letter number 421A00003823 as instructed for processing.

Should you have any further questions or require additional information, please do not hesitate to contact the undersigned.

Sincerely yours,

SANDLER, TRAVIS & ROSENBERG, P.A.

By: 
Tiffany Martinez

Enclosures (2)

TM/mmm

Rec 3/24/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SARA APPAREL, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tiffany Martinez

Name of Person

Sandler Travis & Rosenberg, P.A.

Firm/Company

5835 Blue Lagoon Drive, Suite 200

Address

Miami, FL 33126

City/State and Zip Code

iprdepartment@strtrade.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tiffany Martinez at (305) 894-1015

Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Sara Apparel, LLC

2. (a) 1850 NW 84 Avenue, Suite 105, Miami, FL 33126
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) _____
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 05/24/2001 Date of filing/registration in Florida

4. L01000008339 Document number

5. (a) c/o Leonard L. Rosenberg, Esq.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
1000 NW 57th Court, Suite 600
Miami, FL 33126

(b) Joshua L. Rodman, Esq.
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Office Address:
5835 BLue Lagood Drive, Suite 200
Miami, FL 33126

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company:

Beatriz Roldan Signature of a member or authorized representative of a member

Beatriz Roldan Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature] Signature of Registered Agent

3/19/01

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00