

" AMENDED "

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000010524

1. Entity Name

SAVION REAL ESTATE DEVELOPMENT, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
198 NE 6th Avenue

3. Mailing Address
198 NE 6th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Delray Beach, FL

City & State
Delray Beach, FL

10/8

DO NOT WRITE IN THIS SPACE

Zip
33483

Country
USA

Zip
33483

Country
USA

4. FEI Number
651122104

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Isack Merenfeld

Street Address (P.O. Box Number is Not Acceptable)

198 NE 6th Avenue

City
Delray Beach

FL

Zip Code
33483

8. 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Isack Merenfeld 198 NE 6th Avenue Delray Beach, FL 33483	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400008685434 10/30/02--01010--001 **50.00
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE

Isack Merenfeld, Manager

9/18/02

561-243-3352

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/01)