

# 2004 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L03000009547

Entity Name: SARA APARTMENTS, LLC

FILED  
Oct 26, 2004  
Secretary of State

**Current Principal Place of Business:**

1949 SHERMAN STREET  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

1949 SHERMAN STREET  
HOLLYWOOD, FL 33020

**New Mailing Address:**

FEI Number: 20-0196609      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

WASSERSTROM, ELLEN  
100 W. CYPRESS CREEK ROAD  
SUITE 700  
FT. 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

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: RANCOURT, DENIS  
Address: 1949 SHERMAN STREET  
City-St-Zip: HOLLYWOOD, FL 33020

Title: MGR ( ) Delete  
Name: SAVOIE, LINE MARIE  
Address: 1949 SHERMAN STREET  
City-St-Zip: HOLLYWOOD, FL 33020

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 608, Florida Statutes.

SIGNATURE: RANCOURT , DENIS

PRES

10/26/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date