

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000079132

Entity Name: SAGA ASSOCIATES, L.L.C.

**FILED**  
**Oct 17, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

1380 NE MIAMI GARDENS DRIVE  
264  
MIAMI, FL 33179

**New Principal Place of Business:**

2500-1 N. STATE ROAD 7  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

1380 NE MIAMI GARDENS DRIVE  
264  
MIAMI, FL 33179

**New Mailing Address:**

2500-1 N. STATE ROAD 7  
HOLLYWOOD, FL 33021

FEI Number: 33-1104306      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:**

SORSHER, ALEX  
2500-1 N STATE ROAD 7  
HOLLYWOOD, FL 33021      US

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

SORSHER, ALEX  
2500-1 N. STATE ROAD 7  
HOLLYWOOD, FL 33021      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: ALEX SORSHER

10/17/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: DOBROLIOBOV, VITALI  
Address: 40 AYLMEER ROAD  
City-St-Zip: LONDON N20BX, UK,

**ADDITIONS/CHANGES:**

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: VITALI DOBROLIOBOV

MGR

10/17/2008

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