L05000018424

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: SANZ BROTHERS, LLC. (Name of	Limited Lia	bility Company)
Dear :	Sir or Madam:		
The e	nclosed Registered Agent/Registered	Office Chan	ge and fee(s) are submitted for filing.
Please	e return all correspondence concerning	g this matter	to the following:
BASI	HARAT AHMAD		
	(Name of Person)		
	(Firm/Company)		. <u></u>
7120	SOUTHGATE BLVD.		
	(Address)		model to some a dec. No.
NOR	TH LAUDERDALE FL 33068 US		
	(City/State and Zip Code)		
For fu	rther information concerning this mat	tter, please ca	ปี!:
BASH	HARAT AHMAD	at (954	270-7667
	(Name of Person)		(Area Code & Daytime Telephone Number)
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	Enclosed is a check for the followi	ng amount:	
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy

INHS18 (8/05)

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limit	ed liability company is: SANZ	BROTHERS, LLC.		
2. The mailing address of	of the limited liability company	is: 7120 SOUTHGATE BLVD.	·	
NORTH LAUDERDALE, F				
02/23/2006		L05000018424		
3. Date of filing/registration in Florida		4. Document number		
5. The name of the regist Florida Department of	ered agent and the registered of State:	ffice address as shown on the	records of the	
-				
STEVEN A. WEINBERG Name				
	7805 SW 6TH COURT			
	Addres	S		
PLANTATION, FLORIDA. 333			IJS ≅	
	City, State a	nd Zip		
6. The name and address of the new registered agent and/or office:		l/or office:	2007 JUL -9 P SECRETARY OI TALLAHASSEE.	
BASHARAT AHMAD			-9 RY SSE	Ç.
	Name 7120 SOUTHGATE BLVD.		e-stra	
	Florida street address (P.O. 1	Box NOT acceptable)	1 4: 10 STATE LORIDA	
	NORTH LAUDERDALE FL :	33068	>	
	City, State and	l Zip		
confirmed that after the c	npany is not organized under the hange or changes are made, the	Florida street address of the	registered offic	e:e

onfirmed 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.

(Signature of a member or authorized representative of a member)

BASHARAT AHMAD

(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 608, 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 of Registered Agent)

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