LDS 000082189

(Requestor's Name)				
(Address)				
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
,				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

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Division of Corporations			
SUBJECT: SDG, LLC			
(Name of	Limited	d Lia	ability Company)
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Of	fice Cha	ange	and fee(s) are submitted for filing.
Please return all correspondence concerning t	his matt	er to	the following:
Bernard Feldman			_
(Name of Person)			
SDG, LLC			_
(Firm/Company)			
5635 Oakmont Ave.			_
(Address)			
Hollywood, Florida 33312			
(City/State and Zip Code)			_
For further information concerning this matte	r, please	call	:
Bernard Feldman	at (95	i 4) 712-9555
(Name of Person)	(A	rea (Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:		M A	AILING ADDRESS:
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
Tallahassee, Florida 32301		. 41	ananooog i tottuu JajiT
Enclosed is a check for the following	g amoui	ıt:	
☑ \$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 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. Name of the limited liability company: SDG, LL	LC
2. (a) Principal office address of limited liability of (Note: MUST BE STREET ADDRESS)	company: 5635 Oakmont Ave. Hollywood, Florida 33312
(b) Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	y:
201401000	LAHATE 2
08/16/2005	L05000082189
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	own on the records of the Florida Dept. of State:
Registered Agent:	Frank Diaz
Registered Office Address:	. 3400 Coral Way
	Miami, Florida 33145
(b) Enter name of NEW Registered Agent and	
NEW Registered Agent:	Bernard Feldman
NEW Registered Office Address:	5635 Oakmont Ave.
<u>(MUST BE FLORIDA STREET ADDRES</u>	SS) Hollywood, Florida 33312 ,FL
that after the change or changes are made, the Flori office of the registered agent will be identical. Or, hereby confirmed that the change(s) was were auth liability company or as otherwise provided in the a limited liability company.	der the laws of the State of Florida, it is hereby confirmed ida street address of the registered office and the business in the case of a Florida limited liability company, it is sorized by an affirmative vote of the members of the limited rticles of organization or the operating agreement of the
(Signature of a member or authorized representative of a member)	
David Houri, Manager (Printed or typed name of signee)	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative that am familiar with and accept the obligations of my F.S. Or A this document is being filed to merely reconfirm that the limited liability company has been	nt and agree to act in this capacity. I further agree to o the proper and complete performance of my duties, and I position as registered agent as provided for in Chapter 608, effect a change in the registered office address, I hereby i notified in writing of this change.
(Signature of Registered Agent)	

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