

105000090809

SABF LLC
8110 N. UNIVERSITY DR
TAMPA FL 33921
(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

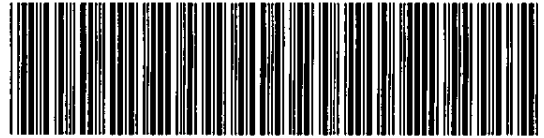
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

DEC - 2 2008

EXAMINER

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: SABI LLC
2. (a) Principal office address of limited liability company: 8110 N. UNIVERSITY DR
(Note: **MUST BE STREET ADDRESS**) TAMARAC, FL 33321
- (b) Mailing address of limited liability company: 8110 N. UNIVERSITY DR
(Note: **MAY BE POST OFFICE BOX**) TAMARAC, FL 33321
3. Date of filing/registration in Florida: 09-14-2005
4. Document number: LOS000090809

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

LARRY J Behan

Registered Office Address:

888 S.E. 3rd AVE #400
FT. LAUDERDALE, FL 33316
RESIGNED 10/6/08

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

Aldin Ray Sharp

NEW Registered Office Address:
(**MUST BE FLORIDA STREET ADDRESS**)

8110 N. UNIVERSITY DR
TAMARAC, FL 33321

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed 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.

Aldin Ray Sharp Jr
(Signature of a member or authorized representative of a member)

Aldin Ray Sharp Jr
(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.

Aldin Ray Sharp Jr
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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