

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000003847

**FILED**  
**Sep 19, 2007**  
**Secretary of State**

**Entity Name:** SAGE PROPERTIES GROUP, LLC

**Current Principal Place of Business:**

1840 SW 22ND ST., 4TH FLOOR  
MIAMI, FL 33145

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 757  
BRANDON, FL 33509

**New Mailing Address:**

302 APACHE LANE  
SEFFNER, FL 33584

**FEI Number:** 20-4125645      **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:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

FREEMAN, FLOYD  
302 APACHE LANE  
SEFFNER, FL 33584      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: FLOYD FREEMAN

09/19/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: FREEMAN, FLOYD JR.  
Address: 1840 SW 22ND ST., 4TH FLOOR  
City-St-Zip: MIAMI, FL 33145

**ADDITIONS/CHANGES:**

Title: MGR      (X) Change ( ) Addition  
Name: FREEMAN, FLOYD JR.  
Address: 302 APACHE LANE  
City-St-Zip: SEFFNER, FL 33584

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: FLOYD FREEMAN JR.

MGR

09/19/2007

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