L060000089843

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08 FEB -7 PM 12: 00

J. BRYAN

FEB - 8 2008

EXAMINER

COVER LETTER

Division of Corporations			
SUBJECT: SAHB Marketing, LLC (Name of	Limited Liab	pility Company)	-
Dear Sir or Madam:			
The enclosed Registered Agent/Registered (Office Chang	ge and fee(s) are submitted for fili	ng.
Please return all correspondence concerning	this matter	to the following:	
Sarang K Ahuja			
(Name of Person)	··· · · · · · · · · · · · · · · · · ·		
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(Firm/Company)			78 VISSES
(i intecompany)			日星
300 Diplomat Parkway, #401			-1 CO
300 Diplomat Parkway, #401 (Address)	: '		-7 PM
			-7 PHIZ:
			SECRETARY OF SIATIONS IVISION OF CORPORATIONS 08 FEB - 7 PM 12: 00
(Address)	,		-7 PHIZ: 00
(Address) Hallandale Beach, FL 33009	ter, please ca	11:	-7 PM 12: 00
(Address) Hallandale Beach, FL 33009 (City/State and Zip Code)		 .ll: 456-8843	-7 PM12: 00
(Address) Hallandale Beach, FL 33009 (City/State and Zip Code) For further information concerning this matt	ter, please ca		<i>u</i>
(Address) Hallandale Beach, FL 33009 (City/State and Zip Code) For further information concerning this matt Sarang K Ahuja (Name of Person) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	at (954 M RG D) P.	₎ 456-8843	<i>u</i>
(Address) Hallandale Beach, FL 33009 (City/State and Zip Code) For further information concerning this matt Sarang K Ahuja (Name of Person) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	at (954 M R D P. Ta	456-8843 (Area Code & Daytime Telephonal AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327	<i>u</i>
(Address) Hallandale Beach, FL 33009 (City/State and Zip Code) For further information concerning this matt Sarang K Ahuja (Name of Person) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	at (954 M R D P. Ta	456-8843 (Area Code & Daytime Telephonal AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327	<i>u</i>

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 limite	ed liability company is: SAHB	Marketing, LLC	
2. The mailing address o	f the limited liability company	is : 300 Diplomat Parkway, #401	
Hallandale Beach, FL 3300)9		
9/13/2006		L06000089843	
3. Date of filing/registration in Florida		4. Document number	
5. The name of the register Florida Department of	ered agent and the registered of State:	ffice address as shown on the records of	the
	Agents and Corporations,	Inc.	
	Name	1	-
	Suite E, 773 4th Avenue No	1	IVID S
	Addres	\$S FEB	SECR
	Naples, FL 34102 City, State a		
7 TT 1 . 1 . 1 . 1	• •	l	
o. The name and address	of the new registered agent an	ind/or office:	걸음(
	Sarang K Ahuja	7.	REAL
	Name	nd/or office:	SS
	300 Diplomat Parkway, #401		<u>.</u>
	Florida street address (P.O.	Box NOT acceptable)	
	Hallandale Beach FL	33009	
	City, State an	d Zip	
confirmed that after the cland the business office of liability company, it is he of the members of the lin or the operating agreement	hange or changes are made, the registered agent will be id reby confirmed that the chang nited liability company or as ont of the limited liability comp	the laws of the State of Florida, it is hereby the Florida street address of the registered fentical. Or, in the case of a Florida limit (s) was/were authorized by an affirmative therwise provided in the articles of organ any.	office ted ve vote
(Signature of a member or author	ized representative of a member)		
Sarang K Ahuja			
(Printed or typed name of signee)		<u> </u>	
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm	intment as registered agent and so of all statutes relative to the discount of accept the obligations of my his document is being filed to that the limited liability comp	nd agree to act in this capacity. I further proper and complete performance of my position as registered agent as provided merely reflect a change in the registered any has been notified in writing of this c	agree to duties, for in office hänge.
(Signature of Registered Agent)			

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