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TALLAHASSEE, FLORIDA

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T. HAMPTON

OCT 21 2008

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAPPHIRE NATIONAL, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Warren J. Kozlow, Esq.
(Name of Person)

Warren J. Kozlow, P.A.
(Firm/Company)

5850 Coral Ridge Drive, Suite 201
(Address)

Coral Springs, Florida 33076
(City/State and Zip Code)

For further information concerning this matter, please call:

Warren J. Kozlow, Esq. at (954) 340-2200
(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 following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

LAW OFFICES OF
WARREN J. KOZLOW, P.A.

HERON BAY CORPORATE CENTER
5850 CORAL RIDGE DRIVE
SUITE 201
CORAL SPRINGS, FLORIDA 33076

OF COUNSEL:
RITTER CHUSID BIVONA & COHEN, LLP

TEL.: (954) 340-2200
(561) 394-2180
FAX: (954) 340-2210
(561) 394-2582

October 15, 2008

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

Re: Sapphire National, LLC - Change of Registered Agent's Address

Dear Sir/Madam:

Enclosed please find our Cover Letter and Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company, changing the address of the Registered Agent, along with our check for the filing fee in the amount of \$25.00

If you have any questions or wish to further discuss this matter, please do not hesitate to contact me.

Very truly yours,



Warren J. Kozlow, Esq.

WJK:ckh
Enclosures

cc: Roy Gaddey, Manager w/enclosures
Nevin K. Shapiro w/enclosures

**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: SAPPHIRE NATIONAL, LLC +

2. (a) Principal office address of limited liability company: 2220 Christy Lane +
(Note: **MUST BE STREET ADDRESS**) Oldsmar, Florida 34677 +

(b) Mailing address of limited liability company: 2220 Christy Lane +
(Note: **MAY BE POST OFFICE BOX**) Oldsmar, Florida 34677 +

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3. Date of filing/registration in Florida

4. Document number

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

Registered Agent: Warren J. Kozlow, Esq.

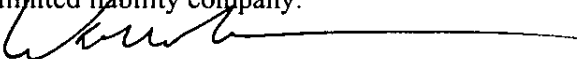
Registered Office Address: 7000 West Palmetto Park Road
Suite 305
Boca Raton, Florida 33433 +

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

NEW Registered Agent: _____

NEW Registered Office Address: 5850 Coral Ridge Drive
(**MUST BE FLORIDA STREET ADDRESS**) Suite 201
Coral Springs, FL 33076 +

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.

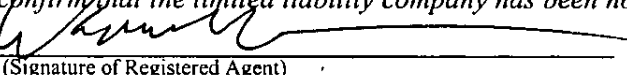


(Signature of a member or authorized representative of a member)

Warren J. Kozlow, Esq.

(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 32309

FILING FEE: \$25.00

INHS18 (05/08)

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TALLAHASSEE, FLORIDA

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