

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000090153

Entity Name: SAGE HOSPITALITY, LLC

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

10901 PINE LODGE TRAIL
DAVIE, FL 33328 US

New Principal Place of Business:

1500SE. 17TH ST. CAUSEWAY
FT.LAUDERDALE, FL 33316 US

Current Mailing Address:

10901 PINE LODGE TRAIL
DAVIE, FL 33328 US

New Mailing Address:

1500SE 17ST .CAUSEWAY
FT. LAUDERDALE, FL 33316 US

FEI Number: 26-3408923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DADE COUNTY CORPORATE AGENTS INC
18901 N.E. 29TH AVENUE
SUITE 100
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PATEL, SUNIL
Address: 10901 PINE LODGE TRAIL
City-St-Zip: DAVIE, FL 33328 US

Title: MGRM () Delete
Name: PATEL, USHA
Address: 10901 PINE LODGE TRAIL
City-St-Zip: DAVIE, FL 33328 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PATEL, SUNIL
Address: 1500SE. 17TH ST. CAUSEWAY
City-St-Zip: FT.LAUDERDALE,, FL 33316 US

Title: MGRM (X) Change () Addition
Name: PATEL, USHA
Address: 1500SE. 17TH ST. CAUSEWAY
City-St-Zip: FT. LAUDERDALE, FL 33316 US

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: SUNIL PATEL

MGRM

04/22/2009

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