L08000117710

(Requestor's Name)
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(Business Entity Name)
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TO: Registration Section Division of Corporations		
SUBJECT: SAW REALTY, LLC (Name	of Limited Liability Company)	Đ
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Peter L. Breton, Esq.		
(Name of Person)		2
Moyle, Flanigan, Katz. Breton, White & Krasker, (Firm/Company)	P.A. AHASS	2009 JAN 30
P.O. Box 3888	المالية المالي المالية المالية المالي	2 [
(Address)	TORDE TO SERVICE TO SE	4 4: 30
West Palm Beach, FL 33402 (City/State and Zip Code)		
For further information concerning this mat	ter, please call:	
Peter L. Breton	at (561) <u>822-0385</u>	
(Name of Person) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	(Area Code & Daytime Telephone Number) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the followi	ng amount:	
✓ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

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 limit	ed liability company: SAW Rea	Ity, LLC	<u></u> I	6
	ce address of limited liability compa	any: 235 South County Road Suite 210 Palm Beach, FL 33480		© ⊕ ⊕
(b) Mailing addre (Note: MA)	ess of limited liability company: V BE POST OFFICE BOX	P.O. Box 3368 Palm Beach, FL 33480	2009 JAN	
December 30, 2008 3. Date of filing/reg 5. (a) Registered A	istration in Florida gent and Registered Office shown of	L08000117710 4. Document number on the records of the Florida Do	30 PM 4: 30	T
Registered A		Mark Z. Waxman	The contract of the contract o	
Registered O	ffice Address:	2350 South County Road Suite 210 Palm Beach, FL 33480		⊕
(b) Enter name o	f NEW Registered Agent and/or N	EW Registered Office addres	<u>ss</u> :	
<u>NEW</u> Regist	ered Agent:	Mark Z, Waxman		Ð
<u>NEW</u> Regist (MUST BE)	ered Office Address: FLORIDA STREET ADDRESS)	235 South County Road Suite 210 Palm Beach	₱,FL 33480	0
that after the change office of the register hereby confirmed the liability company or limited liability com	y company is not organized under the or changes are made, the Florida streed agent will be identical. Or, in the at the change(s) was/were authorize as otherwise provided in the article pany. Mathorized representative of a member)	reet address of the registered of e case of a Florida limited liabi	ffice and the business	1
Mark Z. Waxman (Printed or typed name of	signee)			
	appointment as registered agent and sistence of all statutes relative to the daccept the obligations of my positions as being filed to merely reflect ted liability company has been notif	d agree to act in this capacity. proper and complete performa on as registered agent as provi a change in the registered offic fied in writing of this change.	I further agree to nce of my duties, and I ded for in Chapter 608 ce address, I hereby	3,

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