

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000002995

Entity Name: SAGESSE, LLC

**FILED**  
**Apr 03, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4151 HALLANDALE BEACH BLVD  
WEST PARK, FL 33023

**New Principal Place of Business:**

304 INDIAN TRACE  
448  
WESTON, FL 33326

**Current Mailing Address:**

4151 HALLANDALE BEACH BLVD  
WEST PARK, FL 33023

**New Mailing Address:**

304 INDIAN TRACE  
448  
WESTON, FL 33326

FEI Number: 26-4036582

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GEORGE, KAUPER  
4151 HALLANDALE BEACH BLVD  
WEST PARK, FL 33023 US

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

LARIVIERE, ALFRED MGRM  
304 INDAIN TRACE  
448  
WESTON, FL 33326 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: ALFRED LARIVIERE

04/03/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LARIVIERE, ALFRED  
Address: 304 INDIAN TRACE #448  
City-St-Zip: WESTON, FL 33326

I hereby 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: ALFRED LARIVIERE

MGRM

04/03/2012

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