

NOV-11-2009 WED 11:09 AM Mural Wald Biondo

FAX NO. 3052584842

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : MURAL, WALD, BIONDO, MORENO, P.A.
Account Number : 076150002103
Phone : (305) 444-0101
Fax Number : (305) 444-0174

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SG SARASOTA, LLC

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Certified Copy	0
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2009 NOV 12 PM 2:02

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A. LUNT

NOV 13 2009

EXAMINER

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SG SARASOTA, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brandon Biondo

Name of Person

Murai Wald Blondo & Moreno, P.A.

Firm/Company

1200 Ponce de Leon Blvd

Address

Coral Gables, FL 33134

City/State and Zip Code

BBiondo@mwbm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brandon L. Biondo

Name of Person

at (305)

444-0101

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SG SARASOTA, LLC

*(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)*

The Articles of Organization for this Limited Liability Company were filed on 6/29/2009 and assigned
Florida document number L09000063250

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

New Registered Agent's Signature, If changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	Frank K. Grosch	650 S. Northlake Blvd Suite 450 Altamonte Springs, FL 32701	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated November 10, 2009

Salvador F. Leccese
Signature of a member or authorized representative of a member

Salvador F. Leccese
Typed or printed name of signer

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Filing Fee: \$25.00