U11000077170

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(City/State/Zip/Phone #)		
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SECRETARY OF STATE
TALL AHASSEE, FLORION

T. CLINE

SEP 1 9 2011

EXAMINER

COVER LETTER -

TO: Registration Section Division of Corporations	
SUBJECT:	SARTE, LLC
	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered	ed Office Change and fee(s) are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
YOEL SANTANA	
Name of Person	
SARTE, LLC Firm/Company	
1100 W 35 ST APT# 2	
MIAMI, FL. 33012 City/State and Zip Code	SEP 16 AM II: 00 RETARY OF STATE AHASSEE, FLORIDA
Sartellc@hotmail.cor E-mail address: (to be used for future annual rep	n Port notification)
For further information concerning this r	natter, please call:
YOEL SANTANA Name of Person	at (239) 719-0157 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 follo	owing amount:
CA \$25 Filing Foo	C55 Filing Fee & Certified Conv

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.

Name of the limited liability company:	SARTE, LLC
2. (a) Principal office address of limited liability company	1100 W 35 ST APT# 28
(Note: MUST BE STREET ADDRESS)	MIAMI, FL. 33012
(b) Mailing address of limited liability company:	1100 W 35 ST APT# 28
(Note: MAY BE POST OFFICE BOX)	MIAMI, FL. 33012
O7/05/2011 3. Date of filing/registration in Florida	L11000077170 4. Document number
5. (a) Registered Agent and Registered Office shown on the	the records of the Florida Dept. of State:
Registered Agent:	CORPORATION SERVICE COMPANY
Registered Office Address:	1201 HAYS STREET
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV NEW Registered Agent</u> : NEW Registered Office Address: (MUST RE FLORIDA STREET ADDRESS)	YOEL SANTANA 1100 W 35 ST APT# 28
(MUST BE FLORIDA STREET ADDRESS)	MIAMI REFL 33012
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organization
YOEL SANTANA	
Printed or typed name of signee	-
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

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

Signature of Registered Agent