

L11000098293

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800250221898

08/16/13--01025 -009 **35.00

2013 SEP -9 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

SEP 11 2013

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAW CAPITAL, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven R. Amster

Name of Person

Kodsi Law Firm, P.A.

Firm/Company

1855 Griffin Road, Suite A-370

Address

Dania Beach, FL 33004

City/State and Zip Code

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

For further information concerning this matter, please call:

Steven R. Amster at (954) 771-8277
Name of Person 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 following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

FILED
2013 SEP -9 PM 12:39
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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 limited liability company: SAW CAPITAL, LLC

2. (a) Principal office address of limited liability company: 2474 PROVENCE CIRCLE
(Note: MUST BE STREET ADDRESS) WESTON, FL 33327

(b) Mailing address of limited liability company: 2474 PROVENCE CIRCLE
(Note: MAY BE POST OFFICE BOX) WESTON, FL 33327

08/26/2011

L11000098293

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: KODSI LAW FIRM, P.A.

Registered Office Address: 701 WEST CYPRESS CREEK ROAD, THIRD FLOOR
FORT LAUDERDALE, FL 33309

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: KODSI LAW FIRM, P.A.

NEW Registered Office Address: 1855 GRIFFIN ROAD, SUITE A-370
(MUST BE FLORIDA STREET ADDRESS) DANIA BEACH, FL 33504

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

STEVEN R. AMSTER

Printed or typed name of signer

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.


Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 23, 2013

STEVEN R. AMSTER
AMSTER GOTTFRIED, P.A.
1855 GRIFFIN ROAD, SUITE A-370
DANIA BEACH, FL 33004

SUBJECT: SAW CAPITAL, LLC
Ref. Number: L11000098293

We have received your document for SAW CAPITAL, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 013A00020180

SECRETARY OF
TALLAHASSEE, FLORIDA

2013 SEP -9 PM12:39

FILED