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 : LEGALZOOM.COM INC.

Account Number : I20010000062 : (323)962-9600

Fax Number

: (323)962-3889

**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 REGISTERED AGENT CHANGE SADAN MARKETING SYSTEMS, LLC

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SADAN MARKETING SYSTEMS, LI	LC
Name of Limite	d 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 m	natter to the following:
Cheyenne Moseley	
Name of Person	
Legalzoom.com, Inc.	
Firm/Company	
100 W. Broadway Suite 100	
Address	
Glendale, CA 91210	
City/State and Zip Code	
dsadan@sadanmarketing.com	
E-mail address: (to be used for future annual report notification	on)
For further information concerning this matter, plc	ase call:
Imelda Vasquez	962-8600 ext 7950
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 amo	ount:
□ \$25 Filing Fee	■ \$55 Filing Fee & Certified Copy
INHS18 (12/13)	-

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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: SADAN MAR	KETING SYSTEMS, LLC
 (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS) 	any: 5401 S. Kirkman Rd. Suite 310 Orlando, FL 32819
(b) Malling address of limited liability company: (Norg: MAY BE POST OFFICE BOX)	14311 Biscayne Blvd Unit §14326 Miaml, FL 33261
12/30/2014	L15000008741
3. Date of filling/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State;
Registered Agent:	DANIEL SADAN
Registered Office Address:	17109 N BAY RD D300 SUNNY ISLES BEACH, FL 33160
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office address:
NEW Registered Agent:	United States Corporation Agents, inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	13302 Winding Oak Court Suite A Temps ,FL 38812
If the limited liability company is not organized under the confirmed that after the change or changes are made, the end the business office of the registered agent will be ideliability company, it is hereby confirmed that the change he members of the limited liability company or as other the operating agreement of the limited liability company.	entical. Or, in the case of a Florida limited (e) was/ware authorized by an affirmative vote of
DANIEL SADAN Printed or typed nume of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with that accept the obligations of my Chapter 605, F.S. Or, it his document is being filed to baddress, I hereby confirm that the limited liability completed in the complete of the com	d agree to act in this capacity. I further agree to priner and cumplete performance of my duites, position as registered agent as provided for inversion as replied a change in the registered office any has been notified in writing of this change.
Signature of Registered Agent Cheyenne Moseley, Asst. Secretary of	on behalf of United States Corporation Agents, Inc.
Division of Corporations, P.O. Box FILING FEE:	
NHS18 (12/13)	, ggacou