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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

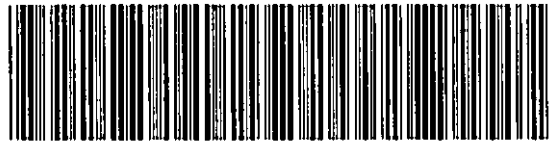
(Business Entity Name)

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TALLAHASSEE, FL 32399

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T.G.
03/26/19

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SAS Investment Group, 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:

Stuart Sagraves

Name of Person

SAS Investment Group, LLC

Firm/Company

4367 Conroy Club Drive

Address

Orlando, FL 32835

City/State and Zip Code

ssagraves87@yahoo.com

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

For further information concerning this matter, please call:

Stuart Sagraves

863

669-7878

at ()

Name of Person

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

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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MGRM	Alana Tassi	4367 Conroy Club Drive Orlando, FL 32835	<input type="checkbox"/> Add
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☒ Remove

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2019 MAR 15 11:11
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HALLMARKS & CO.


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HALL AND ST. FLORIAN

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated March 13, 2019

_____, 2019



Signature of a member or authorized representative of a member

Typed or printed name of signee