## W19000258066

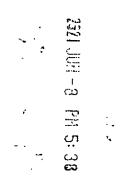
(Requestor's Name)		
(Address)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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Special Instructions to Filing Officer:		
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Office Use Only



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## **COVER LETTER**

Division of Corporations	
SUBJECT: SAI AYURVEDIC INSTITUTE LLC	
Name of Lim	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
VAIDEHI DALVI	
Name of Person	
DMG WORLDWIDE CONSULTING LLC	
Firm/Company	<del></del>
2 S UNIVERSITY DRIVE STE 300	
Address	<del></del>
PLANTATION, FL 33324	
City/State and Zip Code	
vaidehi@dmgworldwideconsulting.com	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	all:
MAGDALA MARIA JARAMILLO 95.	4 701-3608
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

ame of the limited liability company: SAI AYURVED	IC INSTITUTE I	.LC
	(b)	
Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
140 S UNIVERSITY DRIVE		
SUITE D	<del></del>	
PLANTATION FL 33324		
Date of filing/registration in Florida	- <sub>4.</sub>	Document number
	f the Florida Dent. o	of State:
BUSINESS FILINGS INCORPORATED		
Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	<del></del>
1200 SOUTH PINE ISLAND ROAD		5~2
PI ANTATION	22224	
, Fl	L	
DMG WORLDWIDE CONSULTING, LLC		8
Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	
2 SOUTH UNIVERSITY DRIVE		<u>က်</u> က် ယ
NEW Registered Office Address:		Go
SUITE 300		
		<del></del>
PLANTATION, FI	33324	
or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li- are authorized by an affirmative vote of the members of	registered offic ability company of the limited lia	te and the business office of the registered to it is hereby confirmed that the change(s) bility company or as otherwise provided in
adalare Jaipmilla T.	MAGDALA	A MARIA JARAMILLO
ute of a member or authorized representative of a member		Printed or typed name of signee
oy accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provide	ree to act in this performance of d for in Chapter	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed
in writing of this change.  A conference of Acceptance of the registered office address, I in writing of this change.	nereby confirm t	that the limited liability company has been
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  140 S UNIVERSITY DRIVE  SUITE D  PLANTATION FL 33324  Date of filing/registration in Florida  Registered Agent and Registered Office shown on the records of BUSINESS FILINGS INCORPORATED  Registered Office Address (MUST BE FLORIDA STREET)  1200 SOUTH PINE ISLAND ROAD  PLANTATION FLORIDE CONSULTING, LLC  Enter name of NEW Registered Agent and/or NEW Registered  2 SOUTH UNIVERSITY DRIVE  NEW Registered Office Address:  SUITE 300  PLANTATION FINE ISLAND ROAD  PLANTATION FINE IS	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  140 S UNIVERSITY DRIVE  SUITE ID  PLANTATION FL 33324  Date of filing/registration in Florida 4.  Registered Agent and Registered Office shown on the records of the Florida Dept. of BUSINESS FILINGS INCORPORATED  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  1200 SOUTH PINE ISLAND ROAD  PLANTATION , FL  33324  DMG WORLDWIDE CONSULTING, LLC  Enter name of NEW Registered Agent and/or NEW Registered Office address: 2 SOUTH UNIVERSITY DRIVE  NEW Registered Office Address: SUITE 300  PLANTATION , FL  33324  mitted liability company is not organized under the laws of the State of or changes are made, the Florida street address of the registered office ill be identical. Or, in the case of a Florida limited liability company are authorized by an affirmative vote of the members of the limited liability compare authorized by an affirmative vote of the members of the limited liability compare authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an affirmative vote of the members of the limited liability company are authorized by an

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