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#### **COVER LETTER**

TO:	Registration Section
	Division of Corporations

SUBJECT: Saba Operations, 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:

## Yuriy Storozhenko

Name of Person

Saba Operations, LLC

Firm/Company

663 S Rancho Santa Fe Rd, #211

Address

San Marcos, CA 92078

City/State and Zip Code

sabaops@pm.me

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

For further information concerning this matter, please call:

### Yuriy Storozhenko

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



# 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.

I. Na	me of the limited liability company: Saba	Operations,	LLC
	7901 4th St N	<sub>(b)</sub> 663 S	Rancho Santa Fe Rd, #211
	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	у:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	STE 300		
	St. Petersburg, FL 33702	San M	arcos, CA 92078
	01/12/2023	<u>L230</u>	00026850
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	CINDY'S FLORIDA LLC	<u> </u>	_
	Registered Agent and Registered Office shown on the reco	rds of the Florida Dept. of Sta	te:
	8051 N. TAMIAMI TRAIL		_
	Registered Office Address (MUST BE FLORIDA STR	EET ADDRESS)	
	SUITE E6		_
	SARASOTA	FL 34243	_
(b)	Registered Agents Inc		_
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regi</u>	stered Office address:	
	7901 4th St N		_
	NEW Registered Office Address:		
	STE 300		_
	St. Petersburg	.FL 33702	_
If the li	imited liability company is not organized under the	he laws of the State of Fl	orida, it is hereby confirmed that after

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 member or authorized representative of a member

Yuriy Storozhenko - Manager呈

Printed or typed name of signter co

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply will 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 605, 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.

David Roberts - Assistant Secretary

Signature of Registered Agent