M21000013874

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone #;)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(De	ocument Number)	<u></u>
Certified Copies	Certificates o	of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



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March 10, 2022

FLORIDA CAPITAL COURIER

SUBJECT: SAKAL VENTURES SERIES FUND, LLC, SERIES IV

Ref. Number: M21000013874

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The registered agent must sign accepting the designation.

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) 245-6050.

Letter Number: 522A00005761

Irene Albritton Regulatory Specialist III

2021MAP 10 PM 2:12

FLORIDA CAPITAL COURIER SERVICES, INC '. 2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

(Business Name)	Document #
Walk in	Pick up time
Mail out	Will wait
Photocopy	
Certified Copy (please stamp each	page) Articles of Incorporation
Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Not for Profit X Limited Liability Domestication Other CORP	AmendmentResignation of R.A. Officer/Director Change of Registered AgenDissolution/WithdrawalMergerConversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing
Fictitious Name	Limited Partnership Reinstatement
APOSTIL()	Other

COVER LETTER

Registration Section Division of Corporations TO:

SUBJECT:	SAKAL VENTURES SERIES FUI	ND, LLC, SERIES	IV	
	Name of Fore	eign Limited Li	ability C	Company
Dear Sir or Mad	dam:			
The enclosed ap	oplication, certificate and fee(s) are submitte	d for fili	ng.
Please return al	correspondence concerning	this matter to th	ne follow	ving:
MANAGER				
	Name of Person			
SAKAL VENTURE	S SERIES FUND, LLC, SERIES IV	,		
	Firm/Company		_	
3323 NE 163RD S	TREET			
	Address			
NORTH MIAMI I	BEACH, FL 33160		_	
	City/State and Zip Cod	de	_	
otherdocforus@gn				
E-mail addres	s: (to be used for future annua	al report notific	ation)	
For further infor	mation concerning this matter	r, please call:		
LURA BARUA		888 _at (650-3	738
N	lame of Person		e & Day	time Telephone Number
Division P.O. Box	ion Section of Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303		ration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810
Enclosed \$25 Filing Fee R2E055 (9/15)	is a check for the following ☐ \$30 Filing Fee & Certificate of Status	amount: ☐ \$55 Filing Certified (☐ \$60 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE . AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Co			se Florida Department	of
State: SAKAL VENTURES	SERIES FUND, LLC	, SERIES IV		
Enter new principal office addre	ess, if applicable:			
(<u>Principal office address</u> <u>MUST BE A STREET ADDRE</u>	<u>:ss</u>)			
Enter new mailing address, if ap (Mailing address				
MAY BE A POST OFFICE BO	<u>(X</u>)			
				AR HIR
2. The Florida document number	of this limited liab	oility company is: M	21000013874	10 to 1
3. Jurisdiction of its organization				
4. Date authorized to do busines	s in Florida:10/	11/2021		0.22. 0
SECTION II (5-9 complete onl				*
5. New name of the limited liabi	lity company:(must	contain "Limited Lia	bility Company, ""L.	L.C.," or "LLC.")
(If name unavailable, enter altern copy of the written consent of the must contain "Limited Liability Courses to the course to t	managers or mana	iging members adoni	nsacting business in F ting the alternate name	lorida and attach a The alternate name
6. If amending the registered ages	nt and/or registered	officer address on o dress here:	ur records, enter the na	ame of the new
Name of New Registered Agent:	LEGACY RA GR	OUP INC.		
New Registered Office Address:	2330 CLARE DR			
			er Florida Street Addr	
	TALI	AHASSEE	, Florida	32309 Zip Code
		City		Zip Code
New Registered Agent's Signatur hereby accept the appointment a he provisions of all statutes relati nd accept the obligations of my p ocument is being filed to merely ability company has been notified	s registered agent ive to the proper ar position as register reflect a change in	and agree to act in the and complete performe ed agent as provided the registered office	ance of my duties, and for in Chapter 605, F address, I hereby con,	l am familiar with
	If Cha		ent, Signature of New	Registered Agent

8. If the ameno	lment changes person, title or capacity in	accordance with 605.0902 (1)(c), indicate th	at change:
Title/ Capacity	<u>Name</u>	Address	Type of A
MGR	KRIS T BORTNOVSKY	3323 NE 163RD STREET	
		NORTH MIAMI BEACH, FL 33160	≘ R
MGR	TAYLOR BARLING	3323 NE 163RD STREET	_
		NORTH MIAMI BEACH, FL 33160	= Re
MGR	ARORA AJAY	3323 NE 163RD STREET	🗆 ۸
		NORTH MIAMI BEACH, FL 33160	= Rc
MGR	SAKAL CAPITAL INVESTMENTS, LLC	3323 NE 163RD STREET	= A
		NORTH MIAMI BEACH, FL 33160	□Rei
		·	
aforementione	der the lawlof which this entity is organ	the official having custody of records in the	□Rer

Filing Fee: \$25.00