

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000006249

Entity Name: SAI MAHARAJ LLC**Current Principal Place of Business:**5001 EAST SLIVER SPRIUNG BLVD
SILVER SPRINGS, FL 34488**Current Mailing Address:**5001 EAST SLIVER SPRIUNG BLVD
SILVER SPRINGS, FL 34488**FEI Number:** 46-4513904**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PATEL, KEYUN
5001 E SILVER SPRING BLVD
SILVER SPRING, FL 34488 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	PATEL, KEYURI	Name	KUMAR, DEVENDRA L
Address	2026 SAMANTHA LANE	Address	5001 EAST SLIVER SPRIUNG BLVD
City-State-Zip:	VALRICO FL	City-State-Zip:	SILVER SPRINGS FL 34488
Title	MGR	Title	MGR
Name	PATEL, ALPA P	Name	PATEL, SHOBHANA R
Address	5001 EAST SLIVER SPRIUNG BLVD	Address	5001 EAST SLIVER SPRIUNG BLVD
City-State-Zip:	SILVER SPRINGS FL 34488	City-State-Zip:	SILVER SPRINGS FL 34488

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KEYURI PATEL**MANAGER****02/24/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date