

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000225432

**Entity Name:** BLACK SABER GROUP, LLC

**Current Principal Place of Business:**

5325 PRIMROSE LAKE CIRCLE  
SUITE B  
TAMPA, FL 33647

**Current Mailing Address:**

5325 PRIMROSE LAKE CIRCLE  
SUITE B  
TAMPA, FL 33647 US

**FEI Number:** 83-2047728

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MURAI SI, FATAH  
28856 PICANA LANE  
WESLEY CHAPEL, FL 33543 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           | CEO                    | Title           | AUTHORIZED REPRESENTATIVE |
| Name            | MURAI SI, FATAH        | Name            | AKBAR, AMINA R            |
| Address         | 28856 PICANA LANE      | Address         | 28856 PICANA LANE         |
| City-State-Zip: | WESLEY CHAPEL FL 33543 | City-State-Zip: | WESLEY CHAPEL FL 33543    |

*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:** AMINA AKBAR

**AUTHORIZED  
REPRESENTATIVE**

**02/13/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date