

208 0000009508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

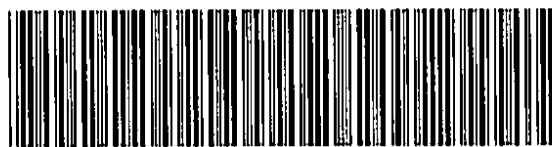
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7/12/18 DS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAN ANTONIO PROPERTIES, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MANUEL A. PEREZ, ESQ.

Name of Person

HARPER MEYER PEREZ HAGEN O'CONNOR ALBE

Firm/Company

201 S. BISCAYNE BLVD. SUITE 800

Address

MIAMI, FL 33131

City/State and Zip Code

MPEREZ@HARPERMEYER.COM

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

For further information concerning this matter, please call:

MANUEL A. PEREZ

Name of Person

305

Area Code

577-3443

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

AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

FIRST: The name of the limited liability company is: SAN ANTONIO PROPERTIES, LLC

SECOND: The Florida Document number of the limited liability company is: L08000009508

THIRD: The street address of the limited liability company's principal office is:

C/O 201 S. BISCAYNE BLVD.

SUITE 800

MIAMI, FLORIDA 33131

The mailing address of the limited liability company's principal office is:

C/O 201 S. BISCAYNE BLVD.

SUITE 800

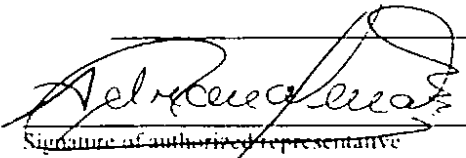
MIAMI, FLORIDA 33131

FOURTH: The date the statement of authority became effective is: 10/04/2017

FIFTH: The statement of authority is cancelled.

OR

The amendment to the statement of authority is


Signature of authorized representative

ADRIANA PENA BORGES

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)