

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000005645

**Entity Name:** SANTA CLARITA, LLC

**Current Principal Place of Business:**

12293 50TH ST. S  
WELLINGTON, FL 33449

**Current Mailing Address:**

3355 SANTA BARBARA DR.  
WELLINGTON, FL 33414 US

**FEI Number:** 65-1009457

**Certificate of Status Desired:** No

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

LUIS F ESCOBAR  
3355 SANTA BARBARA DR.  
WELLINGTON, FL 33414 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	MGRM	Title	MGR
Name	ESCOBAR, LUIS F	Name	ESCOBAR, GEORGETTE
Address	832 FOREST GLEN LANE	Address	832 FOREST GLEN LANE
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	WELLINGTON FL 33414

*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:** GEORGETTE ESCOBAR

**MGR**

**04/27/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date