

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000015262

Entity Name: SANTA MARIA DE SANTA CRUZ, LLC**Current Principal Place of Business:**C/O MELISSA P. LANZA, P.A.
104 CRANDON BLVD., SUITE 420
KEY BISCAYNE, FL 33149**Current Mailing Address:**C/O MELISSA P. LANZA, P.A.
104 CRANDON BLVD., SUITE 420
KEY BISCAYNE, FL 33149**FEI Number:** 30-0665035**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LANZA, MELISSA PESQ.
104 CRANDON BLVD., SUITE 420
KEY BISCAYNE, FL 33149 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
Name	YOVHIO FERREIRA, PEDRO A
Address	104 CRANDON BLVD., SUITE 420
City-State-Zip:	KEY BISCAYNE FL 33149

Title	MGR
Name	YOVHIO ORTIZ, CRISTHIAN P
Address	104 CRANDON BLVD., SUITE 420
City-State-Zip:	KEY BISCAYNE FL 33149

Title	MGR
Name	YOVHIO ORTIZ, NATHALY
Address	104 CRANDON BLVD., SUITE 420
City-State-Zip:	KEY BISCAYNE FL 33149

Title	MGR
Name	YOVHIO ORTIZ, MARCO A
Address	104 CRANDON BLVD., SUITE 420
City-State-Zip:	KEY BISCAYNE FL 33149

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: YOVHIO FERREIRA , PEDRO A

MGR

01/11/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date