

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000042118

**Entity Name:** 2H2MS LLC**Current Principal Place of Business:**10251 W. SAMPLE RD SUITE D  
CORAL SPRINGS, FL 33065**Current Mailing Address:**12130 NW 15TH COURT  
CORAL SPRINGS, FL 33071 US**FEI Number:** 45-4897762**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**R&P ACCOUNTING & TAXES INC.  
150 S.E. 2ND AVE. SUITE 1110  
MIAMI, FL 33131 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                       |
| Name            | SANGUINETTI, MARCELO G     |
| Address         | 10251 W. SAMPLE RD SUITE D |
| City-State-Zip: | CORAL SPRINGS FL 33065     |

|                 |                            |
|-----------------|----------------------------|
| Title           | MGRM                       |
| Name            | SANGUINETTI, MONICA C      |
| Address         | 10251 W. SAMPLE RD SUITE D |
| City-State-Zip: | CORAL SPRINGS FL 33065     |

|                 |                            |
|-----------------|----------------------------|
| Title           | MGRM                       |
| Name            | SANGUINETTI, HORACIO A     |
| Address         | 10251 W. SAMPLE RD SUITE D |
| City-State-Zip: | CORAL SPRINGS FL 33065     |

|                 |                            |
|-----------------|----------------------------|
| Title           | MGRM                       |
| Name            | SANGUINETTI, HECTOR H      |
| Address         | 10251 W. SAMPLE RD SUITE D |
| City-State-Zip: | CORAL SPRINGS FL 33065     |

*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:** HECTOR SANGUINETTI

GM

06/29/2020

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