

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000155468

**Entity Name:** SANCID LLC

**Current Principal Place of Business:**

10710 NW 66TH STREET  
203  
DORAL, FL 33178

**Current Mailing Address:**

10710 NW 66TH STREET  
203  
DORAL, FL 33178

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CID, SARA  
10710 NW 66TH STREET  
203  
DORAL, FL 33178 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 CID, SARA  
Address 10710 NW 66TH STREET 203  
City-State-Zip: DORAL FL 33178

Title MGRM  
Name SANDIA, JORGE  
Address 10710 NW 66TH STREET 203  
City-State-Zip: DORAL FL 33178

*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:** SARA CID

AMBR

04/01/2016

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

\_\_\_\_\_  
Date