

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000073806

**Entity Name:** SANT JI LLC

**Current Principal Place of Business:**

15901 COLLINS AVE  
SUITE 2806  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

15901 COLLINS AVE  
SUITE 2806  
SUNNY ISLES BEACH, FL 33160

**FEI Number:** 82-1968747

**Certificate of Status Desired:** No

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

JARAMILLO VELEZ, LUCIA  
15901 COLLINS AVE  
2806  
SUNNY ISLES BEACH, FL 33160 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           MANAGER  
Name           JARAMILLO VELEZ, LUCIA  
Address       15901 COLLINS AVE, APT 2806  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** LUCIA JARAMILLO VELEZ

**MANAGER**

**02/24/2018**

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

\_\_\_\_\_  
Date