

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000215983

**Entity Name:** RT SQUARED, LLC

**Current Principal Place of Business:**

2119 LAKE ROBERTS LANDING DR.  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

2119 LAKE ROBERTS LANDING DR.  
WINTER GARDEN, FL 34787

**FEI Number: 83-2623002**

**Certificate of Status Desired: No**

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

MENCIA, TAMMY  
18911 LAKE EDGE WAY  
ODESSA, FL 33556 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 SHUFFIELD, ROBERT  
Address 2119 LAKE ROBERTS LANDING DR.  
City-State-Zip: WINTER GARDEN FL 34787

Title MEMB  
Name SHUFFIELD, TERESA  
Address 2119 LAKE ROBERTS LANDING DR.  
City-State-Zip: WINTER GARDEN FL 34787

Title MEMB  
Name MENCIA, TAMMY  
Address 18911 LAKE EDGE WAY  
City-State-Zip: ODESSA FL 33556

Title MEMB  
Name MENCIA, RALPH  
Address 18911 LAKE EDGE WAY  
City-State-Zip: ODESSA FL 33556

*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: TERESA SHUFFIELD**

**MEMBER/OWNER**

**01/26/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date