SIGNATURE: CARLOS ROMERO MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Registered Agent

Title MANAGER Title MANAGER Name ROMERO, CARLOS M Name ESPINOSA, VALERIA L 11206 NORTHWEST 77TH TERRACE, Address 11206 NORTHWEST 77TH TERRACE, Address MEDLEY FL 33178 City-State-Zip: MEDLEY FL 33178 City-State-Zip: Title MANAGER Title MANAGER Name ROMERO, GUIDO I ROMERO, GALO J Name Address 11206 NORTHWEST 77TH TERRACE, Address 11206 NORTHWEST 77TH TERRACE, MEDLEY FL 33178 City-State-Zip: MEDLEY FL 33178 City-State-Zip:

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

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:

## Name and Address of Current Registered Agent:

ROMERO, CARLOS M 1835 NORTHWEST 112TH AVENUE 174

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# Entity Name: SAINTE FAMILLE INVESTMENTS III LLC

10290 NW 64TH TERRACE

APT 302 DORAL, FL 33178

## **Current Mailing Address:**

DOCUMENT# L22000384053

1835 NORTHWEST 112TH AVENUE 174 MIAMI, FL 33172 UN

**Current Principal Place of Business:** 

#### FEI Number: 88-4097402

MIAMI, FL 33172 US

Authorized Person(s) Detail :

02/13/2023

## FILED Feb 13, 2023 Secretary of State 5950866452CC

Certificate of Status Desired: No

Date