

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90040 023 ****50.00

DOCUMENT # L02000035179

1. Entity Name

CRIADERO LA ESPERANZA, LLC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

14631 Mustang Trail

Suite, Apt. #, etc.

3. Mailing Address

14631 Mustang Trail

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Southwest Ranches, FL

City & State

Southwest Ranches, FL

4. FEI Number

57-1155472

Applied For

Not Applicable

Zip

33330

Country

Broward

Zip

33330

Country

Broward

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name Roberto MENDEZ

Street Address (P.O. Box Number is Not Acceptable)

14631 Mustang Trail

City

Southwest Ranches FL

Zip Code

33330

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

MGRM
Roberto Mendez
14631 Mustang Trail Southwest Ranches
FL, 33330

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

4-12-03

CR2E083B (12/02)