

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

FILED
May 18, 2006 8:00 am
Secretary of State

04-24-2006 90067 024 ****50.00

DOCUMENT # **L05000120283**

1. Entity Name

S. Ridgewood, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

91305 Dadeland Blvd

3. Mailing Address

Suite, Apt. #, etc.

1129

Suite, Apt. #, etc.

City & State

Mia, FL

City & State

Zip

33156

Country

US

Zip

Country

4. FEI Number

43-2095002

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Carlos E. Casuso

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

91305 Dadeland Blvd

Suite #1129

City

Mia

FL

33156

**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.

SIGNATURE

[Signature]

4-18-06

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
Ariel A30
915 Miamilakes Drive, #200
Mia, FL 33014**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
Carlos E. Casuso
91305 Dadeland Blvd. #1129
Mia, FL 33156**

TITLE
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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]

4-18-06