LIS COO Mala la CZ

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(Address)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	
(Business Entity Name)	
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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	SANTIAGO SQUARE INVESTM	1ENTS LL	.C			
Ç, Q, 22, 13	Name of Limited Liability Company					
Dear Si	r or Madam:					
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Savra	Santiago					
	Name of Person		-			
	Name of Person					
Santia	igo Square Investments, LLC					
	Firm/Company		_			
11757	Fitzgerald Butler Road					
	Address		_			
Orland	do, FL 32836					
	City/State and Zip Code		_			
square	einvestments@outlook.com					
E-	mail address: (to be used for future annual re	eport notific	cation)			
For furt	her information concerning this matter, pleas	se call:				
Sayra	Santiago at	787	955-9607			
	Name of Person		Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314			
Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	□ \$5:	5 Filing Fee & Certified Copy			

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: Santiago Squ	are Inv	estme	nts, LLC			
2. (a)	11757 Fitzgerald Butler Road	(b	(b) 11757 Fitzgerald Butler Road				
J . (••,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ("	/	Mailing address of limit (Note: MAY BE POS			
		Orlando, FL 32836	_	Orlar	ndo, FL 32836			
		07/10/2018	_	L180	00166607			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	REGISTERED AGENTS INC.						
-	(,	Registered Agent and Registered Office shown on the records of 7901 4TH STREET NORTH	the Florida	Dept. of	State:			
		Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS	<u>l</u>				
		SUITE 300				291		
		ST.PETERSBURG FL	33702			20197		
,	L	Sayra Santiago				ငာ		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ado	lress:		:::		
		11757 Fitzgerald Butler Road				#8 10: 19	نځه .	
		NEW Registered Office Address:				9		
		Orlando, FL	32836					
the cager was the s	cha nt w /we arti	mited liability company is not organized under the layinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of ofganization or the operating agreement of the under the distribution of authorized representative of a member by agreen the appointment as registered agent and agreement of the agreem	the regis ability co if the lim limited l Jos	tered o mpany, ited lial lability e San	ffice and the business of it is hereby confirmed bility company or as off company. tiago Printed or typed name company. I further our.	office of the r that the char herwise prov	egistered ige(s) ided in	
nou	nec	ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect, a change in the registered office address, I it is writing of this change.	perjorma d for in C hereby co	ince of hapter infirm t	my auties, and 1 am fan 605, F.S. Or, if this do hat the limited liability	ntuar wun ai ocument is be company ha	ы ассері ing filed s heen	