| 1430 S DIXIE HIGHWAY SUITE 311 CORAL GABLES, FL 33146 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 | E PEDRO MENENDEZ | | | 01/27/2021 |
| | Electronic Signature of Registered Agent | | | Date |
| Authorized Person(s) Detail : | | | | |
| Title | MGRM | Title | MGRM | |
| Name | MENENDEZ, PEDRO | Name | MENENDEZ, MAYRA | |
| Address | 435 LEUCADENDRA DR. | Address | 435 LEUCADENDRA DR. | |
| City-State-Zip: | CORAL GABLES FL 33156 | City-State-Zip: | CORAL GABLES FL 33156 | |
| | | | | |

Current Mailing Address:

435 LEUCADENDRA DR. CORAL GABLES. FL 33156

FEI Number: 30-0506217

Name and Address of Current Registered Agent:

MENENDEZ, PEDRO 14 SL

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: PEDRO MENENDEZ

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: Yes

MANAGER

01/27/2021

Date

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: SANTONA OFFICE, LLC

Current Principal Place of Business:

435 LEUCADENDRA DR. CORAL GABLES, FL 33156

DOCUMENT# L08000091577