

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000101401

Entity Name: VILLASANTE SH, LLC

Current Principal Place of Business:

7841 NW 56 STREET
DORAL, FL 33166

Current Mailing Address:

7841 NW 56 STREET
DORAL, FL 33166 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VILLASANTE, ALINA C
7841 NW 56 STREET
DORAL, FL 33166 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name VILLASANTE, ALINA
Address 7841 NW 56 STREET
City-State-Zip: DORAL FL 33166

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: ALINA VILLASANTE

MGR

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date