

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000028889

**Entity Name:** SAINT CLOUD TDI LLC

**Current Principal Place of Business:**

3850 PACKARD AVE  
SAINT CLOUD, FL 34772

**Current Mailing Address:**

PO BOX 701585  
SAINT CLOUD, FL 34770

**FEI Number:** 46-2115673

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SAINT CLOUD TDI, LLC  
3850 PACKARD AVE  
SAINT CLOUD, FL 34772 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:** SAMUEL RODRIGUEZ

04/14/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGR
Name	RODRIGUEZ, SAMUEL	Name	GONZALEZ, RAMON
Address	3850 PACKARD AVE	Address	3850 PACKARD AVE
City-State-Zip:	SAINT CLOUD FL 34772-7379	City-State-Zip:	SAINT CLOUD FL 34772

*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:** SAMUEL RODRIGUEZ

MGRM

04/14/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date