

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000345484

**Entity Name:** AE CORPORATE SQUARE, LLC A FLORIDA LIMITED LIABILITY COMPANY

**FILED**  
**Mar 28, 2024**  
**Secretary of State**  
**8944774764CC**

**Current Principal Place of Business:**

4392 CORPORATE SQUARE BLVD UNIT #2  
NAPLES, FL 34104

**Current Mailing Address:**

4392 CORPORATE SQUARE BLVD UNIT #2  
NAPLES, FL 34104 US

**FEI Number: 85-3982142**

**Certificate of Status Desired: No**

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

LOPEZ, MINDI L  
4392 CORPORATE SQUARE BLVD UNIT #2  
NAPLES, FL 34104 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	Title	MGR
Name	LOPEZ, ALEJANDRO	Name	LOPEZ, MINDI
Address	3675 25TH AVE SW	Address	3675 25TH AVE SW
City-State-Zip:	NAPLES FL 34117	City-State-Zip:	NAPLES FL 34117
Title	MGR		
Name	AYALA, EDUARDO		
Address	26611 SAVILLE ROAD		
City-State-Zip:	BONITA SPRINGS FL 34135		

*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: MINDI LOPEZ

MGR

03/28/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date