

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000111902

Entity Name: MET ONE APARTMENTS, LLC**Current Principal Place of Business:**1000 BRICKELL AVENUE, #400
MIAMI, FL 33131**Current Mailing Address:**1000 BRICKELL AVENUE, #400
MIAMI, FL 33131 US**FEI Number:** 42-1769760**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE MAINTENANCE SERVICES, LLC
1000 BRICKELL AVENUE, #400
MIAMI, FL 33131 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	ANGULO, ALEJANDRO
Address	1000 BRICKELL AVENUE, #400
City-State-Zip:	MIAMI FL 33131

Title	MGR
Name	ANGULO, JUAN CARLOS
Address	1000 BRICKELL AVENUE, #400
City-State-Zip:	MIAMI FL 33131

Title	MGR
Name	INNOCENTI, JOSE LUIS
Address	1000 BRICKELL AVENUE, #400
City-State-Zip:	MIAMI FL 33131

Title	MGR
Name	INNOCENTI, MIGUEL ANGEL
Address	1000 BRICKELL AVENUE, #400
City-State-Zip:	MIAMI FL 33131

Title	MGR
Name	MONROS, JOSE
Address	1000 BRICKELL AVENUE, #400
City-State-Zip:	MIAMI FL 33131

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: ANGULO , ALEJANDRO**MGR, CMS AUTHORIZED 02/22/2022**
REPRESENTATIVE_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date