

**2019 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000005347

**Entity Name:** MONTELUPI, LLC

**Current Principal Place of Business:**

7620 NW 25 STREET  
SUITE 9  
MIAMI, FL 33122

**FILED**  
**May 20, 2019**  
**Secretary of State**  
**2845861435CC**

**Current Mailing Address:**

770 CLAUGHTON ISLAND DRIVE  
CU1  
MIAMI, FL 33131

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

PERAZA, JUDITH  
9100 S. DADELAND BOULEVARD  
1500  
MIAMI, FL 33156 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 MGRM  
Name LUPI, JAVIER  
Address 7620 NW 25 STREET  
SUITE 9  
City-State-Zip: MIAMI FL 33122

Title MGRM  
Name MONTES DE OCA, JUAN J  
Address 7620 NW 25 STREET  
SUITE 9  
City-State-Zip: MIAMI FL 33122

Title MGRM  
Name MONTES DE OCA, JUAN ANDRES  
Address 7620 NW 25 STREET  
SUITE 9  
City-State-Zip: MIAMI FL 33122

*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: JUAN JOSE MONTES DE OCA**

**MANAGER**

**05/20/2019**

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

\_\_\_\_\_  
Date