

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000024276

**Entity Name:** STELIVO, LLC

**Current Principal Place of Business:**

STELIVO LLC, 3030 N. ROCKY POINT DRIVE W.  
#150  
TAMPA, FL 33607

**Current Mailing Address:**

STELIVO LLC, 3030 N. ROCKY POINT DRIVE W.  
#150  
TAMPA, FL 33607 US

**FEI Number:** 27-2036878

**Certificate of Status Desired:** No

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

COZZI, OLIVER  
STELIVO LLC, 3030 N. ROCKY POINT DRIVE W.  
#150  
TAMPA, FL 33607 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 COZZI, OLIVER  
Address STELIVO LLC, 3030 N. ROCKY POINT  
DRIVE W.  
#150  
City-State-Zip: TAMPA FL 33607

*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:** OLIVER COZZI

**CEO**

**01/29/2020**

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

\_\_\_\_\_  
Date