

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000113901

**Entity Name:** LMNT LLC

**Current Principal Place of Business:**

59 NW 36 STREET  
MIAMI, FL 33127

**Current Mailing Address:**

59 NW 36 STREET  
MIAMI, FL 33127 US

**FEI Number:** 27-3217728

**Certificate of Status Desired:** No

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

TOZZI, GINO A  
59 NW 36 STREET  
MIAMI, FL 33127 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 TOZZI, GINO A  
Address 59 NW 36 STREET  
City-State-Zip: MIAMI FL 33129

Title MGRM  
Name TOZZI, DOTHY  
Address 59 NW 36 STREET  
City-State-Zip: MIAMI FL 33127

Title MGRM  
Name TOZZI, CAROLINA  
Address 59 NW 36 STREET  
City-State-Zip: MIAMI FL 33127

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GINO A. TOZZI

**MGRM**

**03/18/2013**

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

\_\_\_\_\_  
Date