## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000113901

Entity Name: LMNT LLC

## **Current Principal Place of Business:**

1643 BRICKELL AVE # 3305 MIAMI. FL 33129

**Current Mailing Address:** 

1643 BRICKELL AVE #3305 MIAMI. FL 33129 US

FEI Number: 27-3217728 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOZZI, GINO A 1643 BRICKELL AVE #3305 MIAMI, FL 33129 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.

Title

Name

Address

City-State-Zip:

**MGRM** 

TOZZI, DOTHY

MIAMI FL 33129

1643 BRICKELL AVE # 3305

SIGNATURE:

Name

Title

Address

Electronic Signature of Registered Agent

Date

**FILED** Mar 20, 2020

**Secretary of State** 

4710960659CC

Authorized Person(s) Detail:

Title MGRM

TOZZI, GINO A

1643 BRICKELL AVE # 3305

MIAMI FL 33129 City-State-Zip:

Name TOZZI, GINO

Address 1643 BRICKELL AVE # 3305

**MGRM** 

City-State-Zip: MIAMI FL 33129

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.

03/20/2020 SIGNATURE: GINO TOZZI **MGR**