

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000084457

**Entity Name:** TLON LLC

**Current Principal Place of Business:**

2000 PONCE DE LEON BLVD  
STE 509-E  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2000 PONCE DE LEON BLVD  
STE 509-E  
CORAL GABLES, FL 33134 US

**FEI Number:** 45-2856905

**Certificate of Status Desired:** Yes

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

TONANTE, MARIA  
2000 PONCE DE LEON BLVD  
STE 509-E  
CORAL GABLES, FL 33134 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 ABAL, ENRIQUE MARCELO  
Address 500 EASLEY STREET  
303  
City-State-Zip: SILVER SPRING MD 20910

Title MGR  
Name TONANTE, MARIA  
Address 936 SW 1ST AVENUE  
# 844  
City-State-Zip: MIAMI FL 33130

*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:** ENRIQUE MARCELO ABAL

MGR

03/15/2019

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

\_\_\_\_\_  
Date