

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000127192

**Entity Name:** JOE MORETTI PHASE TWO, LLC

**Current Principal Place of Business:**

2850 TIGERTAIL AVE  
SUITE 800  
MIAMI, FL 33133

**FILED**  
**Apr 16, 2021**  
**Secretary of State**  
**8447062089CC**

**Current Mailing Address:**

2850 TIGERTAIL AVE  
SUITE 800  
MIAMI, FL 33133 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

CORPORATE CREATIONS NETWORK, INC  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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            PRESIDENT  
Name            PEREZ, JORGE M.  
Address        2850 TIGERTAIL AVE  
                 SUITE 800  
City-State-Zip: MIAMI FL 33133

Title            VP  
Name            ALLEN, MATTHEW J.  
Address        2850 TIGERTAIL AVE  
                 SUITE 800  
City-State-Zip: MIAMI FL 33133

Title            VP, TREASURER, SECRETARY  
Name            HOYOS, JEFFERY  
Address        2850 TIGERTAIL AVE  
                 SUITE 800  
City-State-Zip: MIAMI FL 33133

Title            VP  
Name            MILO, JR., ALBERTO  
Address        2850 TIGERTAIL AVE  
                 SUITE 800  
City-State-Zip: MIAMI FL 33133

Title            VP  
Name            DEL POZZO, TONY  
Address        2850 TIGERTAIL AVE  
                 SUITE 800  
City-State-Zip: MIAMI FL 33133

Title            MGR  
Name            JOE MORETTI PHASE TWO  
                 MANAGER, LLC  
Address        2850 TIGERTAIL AVE  
                 SUITE 800  
City-State-Zip: MIAMI FL 33133

*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: JEFFERY HOYOS**

**VP, TREASURER,  
SECRETARY, BY LAUREN  
DUEMIG, ATTORNEY-IN-  
FACT**

**04/16/2021**

