The above named e	entity submits this statement for the purpose of changing its registe	ered office or regist	ered agent, or both, in the State of Florid		
SIGNATURE:	THOMAS O. WELLS, ESQ.				
	Electronic Signature of Registered Agent				
Authorized Person(s) Detail :					
Title	MGR	Title	MGR		
Name F	PEREZ-MARANTE, MIGUEL	Name	MAHLER, SARAH J		

## Entity Name: MARANTE AND MAHLER, LLC **Current Principal Place of Business:**

DOCUMENT# L12000106974

488 W HIGHBANKS ROAD DEBARY, FL 32713

## **Current Mailing Address:**

488 W HIGHBANKS ROAD DEBARY, FL 32713 US

## FEI Number: 46-1915875

## Name and Address of Current Registered Agent:

488 W HIGHBANKS ROAD

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

WELLS & WELLS, P.A. 540 BILTMORE WAY CORAL GABLES, FL 33134 US

City-State-Zip: DEBARY FL 32713

Address

Address

City-State-Zip:

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: MIGUEL PEREZ-MARANTE

MGR

03/20/2019 Date

Electronic Signature of Signing Authorized Person(s) Detail

03/20/2019 Date

Certificate of Status Desired: Yes

488 W HIGHBANKS ROAD

DEBARY FL 32713