

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000134771

**Entity Name:** JATUN LLC

**Current Principal Place of Business:**

7500 NW 25 ST. #109  
MIAMI, FL 33122

**Current Mailing Address:**

P.O. BOX 227851  
MIAMI, FL 33222 US

**FEI Number:** 45-3592503

**Certificate of Status Desired:** No

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

QUILCATE, SARA M  
7500 NW 25 ST. #109  
MIAMI, FL 33122 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 QUILCATE, SARA  
Address P.O. BOX 227851  
City-State-Zip: MIAMI FL 33222

*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:** SARA QUILCATE

MANAGER

04/30/2021

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

\_\_\_\_\_ Date