

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000037902

**Entity Name:** MATUO LLC

**Current Principal Place of Business:**

1216 NE 17TH AVE  
GAINESVILLE, FL 32609

**Current Mailing Address:**

P.O. BOX 655  
BRYN MAWR, PA 19010 US

**FEI Number:** 46-2804743

**Certificate of Status Desired:** No

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

BOMAN, CATHERINE  
1216 NE 17TH AVE  
GAINESVILLE, FL 32609 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 BOMAN, CATHERINE  
Address P.O. BOX 655  
City-State-Zip: BRYN MAWR PA 19010

*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:** CATHERINE M BOMAN

MGR

06/24/2020

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

\_\_\_\_\_ Date