

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000121167

**Entity Name:** MUMI, LLC

**Current Principal Place of Business:**

6355 NW 36TH ST  
L1  
VIRGINIA GARDENS, FL 33166

**Current Mailing Address:**

6355 NW 36TH ST  
L1  
VIRGINIA GARDENS, FL 33166 US

**FEI Number:** 30-0837736

**Certificate of Status Desired:** No

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

ACEVEDO-BELT, MARIA ESQ.  
2 S BISCAYNE BLVD  
STE 3760  
MIAMI, FL 33131 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:** MARIA ACEVEDO-BELT

03/12/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MEKLER, GABRIELA  
Address 1130 NE 91ST TERRACE  
City-State-Zip: MIAMI SHORES FL 33138

Title MGR  
Name MORENO, MARIBEL  
Address 600 GRAPETREE DRIVE  
APT 5GN  
City-State-Zip: KEY BISCAYNE FL 33149

Title MGR  
Name MINSKI, JOEL  
Address 9969 NE 4TH AVENUE RD  
City-State-Zip: MIAMI SHORES FL 33138

Title MGR  
Name ANCHISLAVSKY, DAVID  
Address 6355 NW 36TH ST  
L1  
City-State-Zip: VIRGINIA GARDENS FL 33166

*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:** GABRIELA MEKLER

MANAGER

03/12/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date