

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000142403

**Entity Name:** MOLESTO, LLC

**Current Principal Place of Business:**

745 LENOX AVENUE  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

745 LENOX AVENUE  
MIAMI BEACH, FL 33139 US

**FEI Number:** 47-2752504

**Certificate of Status Desired:** No

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

SARTORI, IVONE  
745 LENOX AVENUE  
MIAMI BEACH, FL 33139 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:** IVONE SARTORI

04/28/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            MANAGER  
Name            IVONE, SARTORI  
Address        745 LENOX AVENUE  
City-State-Zip: MIAMI BEACH FL 33139

Title            AUTHORIZED MEMBER  
Name            SARTORI, NICOLE  
Address        745 LENOX AVENUE  
City-State-Zip: MIAMI BEACH FL 33139

*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:** IVONE SARTORI

MANAGER

04/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date