

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000077111

**FILED**  
**May 15, 2020**  
**Secretary of State**  
**8556177672CC**

**Entity Name:** LEMAT LLC

**Current Principal Place of Business:**

2290 NE 197 STREET  
MIAMI, FL 33180

**Current Mailing Address:**

2290 NE 197 STREET  
MIAMI, FL 33180 US

**FEI Number:** 81-2289701

**Certificate of Status Desired:** No

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

LEVY, LUCY  
2290 NE 197 STREET  
MIAMI, FL 33180 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 LEVY, LUCY  
Address 2290 NE 197 STREET  
City-State-Zip: MIAMI FL 33180

Title MGR  
Name MATTOUT, EMMA  
Address 15901 COLLINS AVE APT. 704  
City-State-Zip: SUNNY ISLES FL 33160

Title MGR  
Name LEVY, CAMILA  
Address 3328 NE 169 STREET  
City-State-Zip: NORTH MIAMI BEACH FL 33160

*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:** LUCY LEVY

**MANAGER**

**05/15/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date