

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000019504

**Entity Name:** AMETHYST BUSINESS, LLC

**Current Principal Place of Business:**

3585 NE 297TH ST  
SUITE 800336  
MIAMI, FL 33180

**Current Mailing Address:**

3585 NE 297TH ST  
SUITE 800336  
MIAMI, FL 33180 US

**FEI Number:** 35-2601517

**Certificate of Status Desired:** No

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

DI LABIO, GIULIA  
3585 NE 297TH ST  
SUITE 800336  
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	AMBR	Title	AMBR
Name	DI LABIO, GIULIA	Name	GENOVESE, MICHELE
Address	3585 NE 297TH ST SUITE 800336	Address	3585 NE 297TH ST SUITE 800336
City-State-Zip:	MIAMI FL 33180	City-State-Zip:	MIAMI FL 33180

*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:** GIULIA DI LABIO

AMBR

06/09/2020

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

\_\_\_\_\_  
Date