

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000133364

**Entity Name:** QUEIMATTI LLC

**Current Principal Place of Business:**

2615 N. GRADY AVE  
SUITE 4118  
TAMPA, FL 33607

**Current Mailing Address:**

2615 N. GRADY AVE  
SUITE 4118  
TAMPA, FL 33607 US

**FEI Number:** 82-1972418

**Certificate of Status Desired:** No

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

MOSCONI, SOPHIA  
2615 N. GRADY  
SUITE 4118  
TAMPA, FL 33607 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	MOSCONI, NICOLA	Name	MOSCONI, SOPHIA
Address	2615 N. GRADY AVE SUITE 4118	Address	2615 N. GRADY AVE. SUITE 4118
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607

*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:** SOPHIA MOSCONI

**OWNER**

**03/12/2020**

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

\_\_\_\_\_  
Date