

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000167993

**Entity Name:** GIOIA ONE LLC

**Current Principal Place of Business:**

8601 NW 27 ST SUITE 051-514130  
DORAL, FL 33122

**Current Mailing Address:**

8601 NW 27 ST SUITE 051-514130  
DORAL, FL 33122 US

**FEI Number:** 83-1211869

**Certificate of Status Desired:** No

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

TORRESE AND ASSOCIATES  
444 BRICKELL AVE. SUITE 418  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGR  
Name CEDRON, FRANCA L  
Address 8601 NW 27 ST SUITE 051-514130  
City-State-Zip: DORAL FL 33122

Title AMGR  
Name ULLMANN, ISABELLA  
Address 8601 NW 27 ST SUITE 051-514130  
City-State-Zip: DORAL FL 33122

*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:** FRANCA L. CEDRON

**MGR**

**06/29/2020**

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

\_\_\_\_\_  
Date