

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000243161

**Entity Name:** MON ATELIER LLC

**Current Principal Place of Business:**

250 GALEN DR.  
22  
MIAMI, FL 33149

**Current Mailing Address:**

250 GALEN DR.  
22  
MIAMI, FL 33149

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

QUINTERO, MARIA X MRS  
250 GALEN DR.  
22  
MIAMI, FL 33149 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 QUINTERO, MARIA X MRS  
Address 250 GALEN DR.  
City-State-Zip: MIAMI FL 33149

Title MGR  
Name QUINTERO, MARIA  
Address 250 GALEN DR.  
City-State-Zip: MIAMI FL 33149

Title MGR  
Name QUINTERO, MARIA X MRS  
Address 250 GALEN DR.  
City-State-Zip: MIAMI FL 33149

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Title MGR  
Name QUINTERO, MARIA X MRS  
Address 250 GALEN DR.  
City-State-Zip: MIAMI FL 33149

*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:** MARIA QUINTERO

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date