

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000273446

**Entity Name:** MUEVE, LLC

**Current Principal Place of Business:**

870 NW 104 AVENUE  
MIAMI, FL 33172

**Current Mailing Address:**

870 NW 104 AVENUE  
MIAMI, FL 33172 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

LEONARDO, JOSE J ESQ  
500 S. DIXIE HIGHWAY  
SUITE 204  
CORAL GABLES, FL 33146 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	Title	MGR
Name	BACILE, SAVERIO	Name	INFANTINO, MARIA C
Address	870 NW 104 AVENUE	Address	870 NW 104 AVENUE
City-State-Zip:	MIAMI FL 33172	City-State-Zip:	MIAMI FL 33172

*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:** SAVERIO BACILE

MGR

05/06/2019

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

\_\_\_\_\_  
Date