

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000179603

Entity Name: MONATE, LLC**Current Principal Place of Business:**7751 NW 107TH AVE APT: 713
DORAL, FL 33178**Current Mailing Address:**7751 NW 107TH AVE APT:713
DORAL, FL 33178**FEI Number:** 88-2098791**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MONICA A. HERRERA
7751 NW 107TH AVE APT:713
DORAL, FL 33178 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	MONICA A. HERRERA
Address	7751 NW 107TH AVE APT: 713
City-State-Zip:	DORAL FL 33178

Title	MGR
Name	VICENTE A. LOPEZ
Address	7751 NW 107TH AVE APT: 713
City-State-Zip:	DORAL FL 33178

Title	MGR
Name	IGNACIO A. LOPEZ
Address	7751 NW 107TH AVE APT: 713
City-State-Zip:	DORAL FL 33178

Title	AUTHORIZED MEMBER
Name	LOPEZ ROSALES, ISABEL C
Address	7751 NW 107TH AVE APT: 713
City-State-Zip:	DORAL FL 33178

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: MONICA A. HERRERA**MANAGER****02/06/2023**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date