

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016363

Entity Name: COVEMONT CO, LLC

Current Principal Place of Business:

522954
MIAMI, FL 33152

Current Mailing Address:

PO BOX 522954
MIAMI, FL 33152 US

FEI Number: 22-3884894

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TARAFA, ROBERTO M
522954
MIAMI, FL 33152 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	MGRM	Title	MGRM
Name	TARAFA, ROBERTO C	Name	TARAFA, ROBERTO M
Address	PO BOX 522954	Address	PO BOX 522954
City-State-Zip:	MIAMI FL 33152	City-State-Zip:	MIAMI FL 33152

Title MGRM
Name TARAFA, JEOVANNI R
Address PO BOX 522954
City-State-Zip: MIAMI FL 33152

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: ROBERTO TARAFA

PRESIDENT

02/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date