

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000162015

**Entity Name:** FAMMA, LLC

**Current Principal Place of Business:**

5349 RISHLEY RUN WAY  
MOUNT DORA, FL 32757

**Current Mailing Address:**

5349 RISHLEY RUN WAY  
MOUNT DORA, FL 32757 US

**FEI Number:** 32-0451154

**Certificate of Status Desired:** No

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

DOMINIUM CONSULTING SERVICES, LLC  
121 S. ORANGE AVE.  
STE 1110 NORTH TOWER  
ORLANDO, FL 32801 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 AMBR  
Name TORTEROLO DALIA, MALVA G  
Address 5349 RISHLEY RUN WAY  
City-State-Zip: MOUNT DORA FL 32757

Title AMBR  
Name D'AMICO TORTEROLO, MARIA MALVA  
Address 5349 RISHLEY RUN WAY  
City-State-Zip: MOUNT DORA FL 32757

Title AMBR  
Name D'AMICO TORTEROLO, FACUNDO  
LUIS  
Address 5349 RISHLEY RUN WAY  
City-State-Zip: MOUNT DORA FL 32757

*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:** MALVA TORTEROLO DALIA

CEO

01/06/2020

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

\_\_\_\_\_  
Date