

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000175886

**Entity Name:** M.A.M.A.3 LLC**Current Principal Place of Business:**18205 BISCAYNE BLVD  
SUITE 2205  
AVENTURA, FL 33160**Current Mailing Address:**2370 NE 184 TERRACE  
NORTH MIAMI BEACH, FL 33160 US**FEI Number:** 37-1769357**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PALOMO, BLANCA  
2370 NE 184 TERRACE  
NORTH MIAMI BEACH, FL 33160 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:** BLANCA PALOMO

01/28/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | MGR                               |
| Name            | MARTINEZ, GABRIEL                 |
| Address         | 18205 BISCAYNE BLVD<br>SUITE 2205 |
| City-State-Zip: | AVENTURA FL 33160                 |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | MGR                               |
| Name            | MARTINEZ, ANDRES                  |
| Address         | 18205 BISCAYNE BLVD<br>SUITE 2205 |
| City-State-Zip: | AVENTURA FL 33160                 |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | MGR                               |
| Name            | MARTINEZ, ANABELA                 |
| Address         | 18205 BISCAYNE BLVD<br>SUITE 2205 |
| City-State-Zip: | AVENTURA FL 33160                 |

|                 |                                   |
|-----------------|-----------------------------------|
| Title           | MGR                               |
| Name            | DIMARCO, SILVIA                   |
| Address         | 18205 BISCAYNE BLVD<br>SUITE 2205 |
| City-State-Zip: | AVENTURA FL 33160                 |

*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:** GABRIEL MARTINEZ

MANAGER

01/28/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date