

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000035640

Entity Name: MILLON MANAGEMENT LLC

Current Principal Place of Business:

1825 PONCE DE LEON BLVD
430
CORAL GABLES, FL 33134

Current Mailing Address:

1825 PONCE DE LEON BLVD
430
CORAL GABLES, FL 33134 US

FEI Number: 81-1562059

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JARAMILLO, JUAN M
470 NW 23 COURT
MIAMI, FL 33125 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 JARAMILLO, JUAN M
Address 470 NW 23 COURT
City-State-Zip: MIAMI FL 33125

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: JUAN JARAMILLO

AMBR

04/12/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date