

**2022 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:** JARAMILLO, JUAN

AMBR

04/29/2022

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

\_\_\_\_\_ Date