

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000121838

**Entity Name:** MONTOSKY, LLC

**Current Principal Place of Business:**

20 N ORANGE AVENUE UNIT 1100  
ORLANDO, FL 32801

**Current Mailing Address:**

15263 NIGHT HERON DR.  
SUMMERLAKE  
WINTER GARDEN, FL 34787 US

**FEI Number:** 61-1889211

**Certificate of Status Desired:** No

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

PIETROPAOLO, GRAZIANO  
15263 NIGHT HERON DR.  
SUMMERLAKE  
WINTER GARDEN, FL 34787 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 MONTI, MICHELE  
Address PARAGUAY 2381 P12.03  
City-State-Zip: ROSARIO, SANTA FE, ARGENTINA  
OC 2000

Title AMBR  
Name GLAGOVSKY, LUCIA  
Address PARAGUAY 2381 P12.03  
City-State-Zip: ROSARIO, SANTA FE, ARGENTINA  
OC 2000

Title AMBR  
Name PIETROPAOLO, GRAZIANO  
Address 15263 NIGHT HERON DR.,  
SUMMERLAKE  
City-State-Zip: WINTER GARDEN FL 34787

*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:** GRAZIANO PIETROPAOLO

AMBR

06/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date