

**2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L19000014752

**Entity Name:** MENTE 48 LLC

**Current Principal Place of Business:**

10222 YALE AVE  
WEEKI WACHEE, FL 34613

**Current Mailing Address:**

10222 YALE AVE  
WEEKI WACHEE, FL 34613

**FEI Number: 86-3418073**

**Certificate of Status Desired: No**

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

NUNAG, CLEMENTE P  
10222 YALE AVE  
WEEKI WACHEE, FL 34613 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: CLEMENTE P NUNAG**

**04/22/2021**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                       |                 |                       |
|-----------------|-----------------------|-----------------|-----------------------|
| Title           | MGR                   | Title           | MGR                   |
| Name            | NUNAG, CLEMENTE P     | Name            | NUNAG, BEATRIZ M      |
| Address         | 10222 YALE AVE        | Address         | 10222 YALE AVE        |
| City-State-Zip: | WEEKI WACHEE FL 34613 | City-State-Zip: | WEEKI WACHEE FL 34613 |

*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: CLEMENTE P NUNAG**

**MGR**

**04/22/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date