

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000101719

**Entity Name:** MAGALY MONTES LLC

**Current Principal Place of Business:**

4001 SW 102 CT  
MIAMI, FL 33165

**Current Mailing Address:**

5401 SW 99 CT  
MIAMI, FL 33165

**FEI Number: 85-1010739**

**Certificate of Status Desired:** No

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

POMAR, LOURDES H  
5401 SW 99 CT  
MIAMI, FL 33165 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 P  
Name ROTELLA, MAGALY  
Address 4001 SW 102 CT  
City-State-Zip: MIAMI FL 33165

*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:** MAGALY ROTELLA

05/12/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date