# 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000260175

**Entity Name: MATEO REHABILITATION CENTER LLC** 

FILED
Apr 30, 2021
Secretary of State
9463169636CC

# **Current Principal Place of Business:**

2141 SW 1 ST STE 206 B MIAMI, FL 33135

# **Current Mailing Address:**

2141 SW 1 ST STE 206 B MIAMI, FL 33135 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

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

LOPEZ, ANTONIO 2141 SW 1 ST STE 206 B MIAMI, FL 33135 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 LOPEZ, ANTONIO JOSE

Address 2141 SW 1 ST

STE 206 B

City-State-Zip: MIAMI FL 33135

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: LOPEZ , ANTONIO JOSE

Electronic Signature of Signing Authorized Person(s) Detail

AMBR

04/30/2021

Date