

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Parana Pines, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paulo Calluf
Name of Person

Parana Pines, LLC
Firm/Company

At Augusto Steffeld, 1735 Bairro Bigorriho Apto 71
Address

Curitiba, Parana 80730150 BR
City, State and Zip Code

tritchie1@cfl.rr.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Todd Ritchie 407 620-4106
Name of Person at Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Chilton Building
2601 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent or both, in the State of Florida.

1. Name of the limited liability company Parana Pines, LLC

2. (a) Al Augusto Steffeld, 1735 Bairro Bigorriho (b) Al Augusto Steffeld, 1735 Bairro Bigorriho
Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)

Apto 71 Apto 71

Curitiba, Parana 80730150 BR Curitiba, Parana 80730150 BR

3. 05/16/2011 4. L11000057825
Date of filing registration in Florida Document number

5. (a) GreyRobinson, P.A.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State

GreyRobinson, P.A.
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

301 E Pine Street Suite 1400

Orlando FL 32801

(b) Todd Ritchie
Enter name of NEW Registered Agent and or NEW Registered Office address

14137 Eden Isle Blvd

Windermere FL 32786

FILED
2019 JUL 31 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Paulo C. Callif PAULO C CALLIF
Signature of a member or authorized representative of a member Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Paula A. ...
Signature of Registered Agent