

# **L14000160706**

Division of Corporations Page 1 of 1

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H14000241013 3)))



H140002410133ABCQ

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
 Fax Number : (850) 617-6383

From: Account Name : CORP USA  
 Account Number : 072450003255  
 Phone : (305) 634-3694  
 Fax Number : (305) 633-9699

2014 OCT 14 AM 9:24  
 FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
 ACACIA CAPITAL INVESTMENTS, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

20612

RECEIVED  
 14 OCT 14 PM 12:00  
 DIVISION OF CORPORATIONS  
 BUREAU OF COMMERCIAL  
 INFORMATION SERVICES

Electronic Filing Menu Corporate Filing Menu Help

K. SALY  
 EXAMINER  
 OCT 15 2014



**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	<u>Name and Address:</u>
"AMBR" - Authorized Member	
"MGR" - Manager	
<u>MGR</u>	<u>Gaston Rossato</u> <u>5787 SW 51 Street</u> <u>Miami, FL 33155</u>
<u>MGR</u>	<u>Christian Nicholas Gao</u> <u>15714 NW 120th Place</u> <u>Alachua, FL 32615</u>
<u>MGR</u>	<u>Renzo Rossato</u> <u>3030 SW 82nd Place</u> <u>Miami, FL 33165</u>

FILED  
 2014 OCT 14 AM 9:24  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

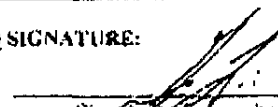
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL.)  
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

\_\_\_\_\_  
 \_\_\_\_\_

**REQUIRED SIGNATURE:**

  
 \_\_\_\_\_  
 Signature of a member or an authorized representative of a member.  
 (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Gaston Rossato  
 Typed or printed name of signee

114000241013