

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000048479

Entity Name: PATRICK CARMO DE OLIVEIRA LLC

Current Principal Place of Business:

10809 WEEPING WILLOW LN
BELTSVILLE, MD 20705

Current Mailing Address:

10809 WEEPING WILLOW LN
BELTSVILLE, MD 20705 US

FEI Number: 20-1306993

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

EAGLE TAX REPRESENTATION, CORP
23150 SANDALFOOT PLAZA DRIVE
STE E
BOCA RATON, FL 33428-6530 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 MGRM
Name DE OLIVEIRA, PATRICK C
Address 4311 CRYSTAL LAKE DR #308
City-State-Zip: POMPANO BEACH FL 33069

Title MGRM
Name SANTOS, PAULA
Address 10809 WEEPING WILLOW LN
City-State-Zip: BELTSVILLE MD 20705

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: PAULA SANTOS

MNGR

05/04/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date