

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000057825

**Entity Name:** PARANA PINES, LLC

**Current Principal Place of Business:**

14137 EDEN ISLE BLVD  
WINDERMERE, FL 34786

**FILED**  
**Jan 17, 2020**  
**Secretary of State**  
**7747714727CC**

**Current Mailing Address:**

AL AUGUSTO STELFELD 1735 BAIRRO BIGORRIHO  
APTO 71  
CURITIBA PARANA80730150 BR, BR

**FEI Number:** 99-0367125

**Certificate of Status Desired:** Yes

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

RITCHIE, TODD  
14137 EDEN ISLE BLVD  
WINDERMERE, FL 34786 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 MR  
Name FREY, ROBERTO  
Address AL AUGUSTO STELFELD, 1735  
BAIRRO BIGORRILHO APTO 71  
City-State-Zip: CURITIBA PARANA 80730150

Title MR  
Name CIMA, LEANDRO LUIS  
Address RUA MARGARIDA DALLARMI, 315  
BAIRRO SANTA FELICIDADE CASA 39  
City-State-Zip: CURITIBA PARANÁ 82015690

Title MR  
Name CALLUF, PAULO CESAR  
Address RUA JOÃO DALLARMI, 100  
BAIRRO SANTO INÁCIO CASA 157  
City-State-Zip: CURITIBA PARANÁ 82015156

Title MR  
Name NICHELLE, FABIO LUIZ  
Address RUA PROF PAULO DE ASSUNÇÃO,  
903  
BAIRRO JD DAS AMERICAS CASA 18  
City-State-Zip: CURITIBA PARANÁ 81540260

*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:** ROBERTO FREY

**MEMBER**

**01/17/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date