

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000142909

**Entity Name:** MS USA BRASIL, LLC.

**Current Principal Place of Business:**

250 SUNNY ISLES BLVD.  
UNIT # 3-PH-6  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

250 SUNNY ISLES BLVD.  
UNIT # 3-PH-6  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number:** 45-4092456

**Certificate of Status Desired:** Yes

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

CESPEDES, CARLOS AESQ.  
113 ALMERIA AVENUE  
CORAL GABLES, FLORIDA, FL 33160 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 ARAUJO, MARCELO  
Address 250 SUNNY ISLES BEACH, UNIT # 3-  
PH-6  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MGRM  
Name RAMALDES, SUZI  
Address 250 SUNNY ISLES BLVD., UNIT # 3-  
PH-6  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** MARCELO ARAUJO

MGRM

04/06/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date