

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000009885

**Entity Name:** ALBORN, LLC

**Current Principal Place of Business:**

RUA DAS CASTANHEIRAS, 644  
SANTA AMELIA, PAMPULHA  
BELO HORIZONTE, BRAZIL, MG 31560--210

**Current Mailing Address:**

245 VISTA DRIVE  
DAVENPORT, FL 33897 US

**FEI Number:** 72-1621944

**Certificate of Status Desired:** Yes

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

ALVARENGA, RICARDO  
245 VISTA DRIVE  
DAVENPORT, FL 33897 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:** ALVARENGA, RICARDO

03/13/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |  |                 |   |
|-----------------|--|-----------------|---|
| Title           | MGRM                                       | Title           | AMBR                                      |
| Name            | ALVARENGA, RICARDO                         | Name            | CARVALHO ALVARENGA, LUCIANA               |
| Address         | RUA DAS CASTANHEIRAS, 644,<br>SANTA AMELIA | Address         | RUA DAS CASTANHEIRAS, 644 SANTA<br>AMELIA |
| City-State-Zip: | BELO HORIZONTE MINAS GERAIS<br>31.56-0210  | City-State-Zip: | BELO HORIZONTE MINAS GERAIS<br>31.56-0210 |

*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:** RICARDO ALVARENGA

MR.

03/13/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date