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: AUGUST GONCALVES

Electronic Signature of Signing Authorized Person(s) Detail

RA

04/27/2018

Date

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000095161

Entity Name: FIRST NATIONAL TRUST OF AMERICA LLC

Current Principal Place of Business:

7853 GUNN HWY # 184 TAMPA, FL 33626

Current Mailing Address:

7853 GUNN HWY # 184 TAMPA, FL 33626 US

FEI Number: 46-0650676

Name and Address of Current Registered Agent:

AUGUST, GONCALVES CIII 7853 GUNN HWY # 184 TAMPA FL 33626 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

Authorized Person(s) Detail :

Authorized Ferson(s) Detail.			
Title	MGRM	Title	MGRM
Name	GONCALVES, AUGUST CIII	Name	GONCALVES, AMANDA
Address	7853 GUNN HWY # 184	Address	7853 GUNN HWY # 184
City-State-Zip:	TAMPA FL 33626	City-State-Zip:	TAMPA FL 33626

FILED Apr 27, 2018

Secretary of State

CC1054498779

Certificate of Status Desired: No

Date