

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000101047

**FILED**  
**Jan 27, 2014**  
**Secretary of State**  
**CC4295457766**

**Entity Name:** ATOS MANAGEMENT LLC

**Current Principal Place of Business:**

20379 W COUNTRY CLUB DR  
CORONADO CONDOS BLDG # 3 UNIT 534  
AVENTURA, FL 33180

**Current Mailing Address:**

RUA GUAPIAÇU 201 APTO 62  
VILA CLEMENTINO  
SAO PAULO, SP - BRAZIL 04024-020 BR

**FEI Number:** 90-0876158

**Certificate of Status Desired:** No

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

NOVELLI, HELENITA  
6220 S ORANGE BLOSSOM TRL.  
STE 600  
ORLANDO, FL 32809 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:** HELENITA NOVELLI

01/27/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM
Name	NOVELLI, HELENITA
Address	RUA GUAPIAQU 201 APTO 62
City-State-Zip:	VILA CLEMENTINO-SAO PAULO SP 04024--020
Title	MGRM
Name	ALIBERTI FILHO, ROBERTO
Address	R DEP JOAO SUSSUMU HIRATA 365 - AP 54A
City-State-Zip:	VILA ADRADE - SAO PAULO SP 05715--010

Title	MGRM
Name	ALIBERTI, RENATA
Address	AN ITACIRA 730
City-State-Zip:	PLANALTO PAULISTA - SAO PAUL SP 04061--000

*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:** HELENITA NOVELLI

MGRM

01/27/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date