

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000049463

**Entity Name:** SERRETIELLO REAL ESTATE INVESTMENTS LLC**Current Principal Place of Business:**1374 SAN LUIS CT  
WINTER SPRINGS, FL 32708**Current Mailing Address:**1374 SAN LUIS CT  
WINTER SPRINGS, FL 32708**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LARSON ACCOUNTING AND CONSULTING SERVICES LLC  
8615 COMMODITY CIRCLE  
SUITE 06  
ORLANDO, FL 32819 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:** CAROLINE LARSON

05/01/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name SERRETIELLO, DUILIO  
Address 1374 SAN LUIS CT  
City-State-Zip: WINTER SPRINGS FL 32708

Title AUTHORIZED MEMBER  
Name SERRETIELLO, EDNA GALLO  
Address 1374 SAN LUIS CT  
City-State-Zip: WINTER SPRINGS FL 32708

Title AUTHORIZED MEMBER  
Name SERRETIELLO, RICARDO  
Address 1374 SAN LUIS CT  
City-State-Zip: WINTER SPRINGS FL 32708

Title AUTHORIZED MEMBER  
Name SERRETIELLO, RODNEY  
Address 1374 SAN LUIS CT  
City-State-Zip: WINTER SPRINGS FL 32708

Title AUTHORIZED MEMBER  
Name DE ANDRADE, ALESSANDRA S  
Address 1374 SAN LUIS CT  
City-State-Zip: WINTER SPRINGS FL 32708

Title AMBR  
Name JUNIOR JOAO PA  
Address 111 HATTAWAT DR  
City-State-Zip: ALTAMONTE SPRINGS FL 32701

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:** SERRETIELLO , RICARDO

AUTHORIZED MEMBER

05/01/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date