

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000070769

**Entity Name:** ISABEL DUARTE PINTO, LLC

**Current Principal Place of Business:**

5104 N. LOCKWOOD RIDGE ROAD  
SUITE 102  
SARASOTA, FL 34234

**Current Mailing Address:**

5104 N. LOCKWOOD RIDGE ROAD  
SUITE 102  
SARASOTA, FL 34234 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BART SCOVILL, PLC  
5104 N. LOCKWOOD RIDGE ROAD  
SUITE 102  
SARASOTA, FL 34234 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 PINTO, ISABEL D  
Address 5104 N. LOCKWOOD RIDGE ROAD,  
STE 102  
City-State-Zip: SARASOTA FL 34234

Title MGRM  
Name BEUTLER, KLAUS  
Address 5104 N. LOCKWOOD RIDGE ROAD,  
STE 102  
City-State-Zip: SARASOTA FL 34234

*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:** ISABEL D. PINTO

**MGRM**

**04/30/2015**

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

\_\_\_\_\_  
Date