

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000116072

**Entity Name:** DANTAS FAMILY LLC

**Current Principal Place of Business:**

C/O PREMIER 3662 AVALON PK E BLVD  
2062  
ORLANDO, FL 32828

**Current Mailing Address:**

C/O PREMIER 3662 AVALON PK E BLVD  
2062  
ORLANDO, FL 32828

**FEI Number:** 30-0797228

**Certificate of Status Desired:** No

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

PREMIER TAX AND ACCOUNTING CONSULTANTS  
3662 AVALON PK E BLVD  
2062  
ORLANDO, FL 32828 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 DANTAS FILHO, JOSE ERINALDO  
Address C/O PREMIER 3662 AVALON PK E BLVD 2062  
City-State-Zip: ORLANDO FL 32828

Title MGRM  
Name BOTELHO DANTAS, THEREZA CRISTI  
Address C/O PREMIER 3662 AVALON PK E BLVD 2062  
City-State-Zip: ORLANDO FL 32828

Title MGRM  
Name BOTELHO DANTAS, MARINA CHRISTI  
Address C/O PREMIER 3662 AVALON PK E BLVD 2062  
City-State-Zip: ORLANDO FL 32828

Title MGRM  
Name BOTELHO DANTAS, LUIS EDUARDO  
Address C/O PREMIER 3662 AVALON PK E BLVD 2062  
City-State-Zip: ORLANDO FL 32828

*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:** JOSE ERINALDO DANTAS FILHO

**MANAGING MEMBER**

**03/19/2015**

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

\_\_\_\_\_  
Date