SIGNATURE: NANCY ACOSTA **AUTHORIZED** REPRESENTATIVE

Electronic Signature of Signing Authorized Person(s) Detail

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,

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	NANCY D. ACOSTA		05	5/01/2019
	Electronic Signature of Registered Agent			Date
Authorized	Person(s) Detail :			
Title	MGR	Title	MGR	
Name	CAMASMIE, PAULO T JR.	Name	CAMASMIE, ADRIANA	
Address	509 PAULISTA AVE., 19TH FLOOR	Address	509 PAULISTA AVE., 19TH FLOOR	
City-State-Zip:	SAO PAULO BR 01311	City-State-Zip:	SAO PAULO BR 01311	
Title	AUTHORIZED REPRESENTATIVE			
Name	ACOSTA, NANCY D			
Address	1490 NE PINE ISLAND ROAD UNIT 6-F			

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

1900 ALAMANDA DRIVE **UNIT 305** NAPLES, FL 34102 US

FEI Number: 38-3940030

Name and Address of Current Registered Agent:

ACOSTA, NANCY D 1490 NE PINE ISLAND ROAD

DOCUMENT# L14000057398 Entity Name: BAPP 500 INVESTMENTS LLC

Current Principal Place of Business:

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

1900 ALAMANDA DRIVE **UNIT 305** NAPLES, FL 34102

Current Mailing Address:

UNIT 6-F CAPE CORAL, FL 34909 US

City-State-Zip: CAPE CORAL FL 33909

that my name appears above, or on an attachment with all other like empowered.

FILED May 01, 2019 Secretary of State 9229074418CC

Certificate of Status Desired: No

05/01/2019

Date