

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000021601

Entity Name: CASMIVA, LLC**Current Principal Place of Business:**2295 S HIAWASSEE RD SUITE 407C
ORLANDO, FL 32835**Current Mailing Address:**14447 BLUEBIRD PARK RD
WINDERMERE, FL 34786 US**FEI Number:** 47-3012018**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TAX ACCOUNTING & FINANCIAL SPECIALISTS LLC
2295 S HIAWASSEE RD SUITE 407F
ORLANDO, FL 32835 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	MGR
Name	BUZETTI MILANO, JERONIMO
Address	RUA ANGELO CUNICO 600 HOUSE #31
City-State-Zip:	CURITIBA 82220-350

Title	MGR
Name	MOREIRA CASTILHO, WILLIAM
Address	RUA ANGELO CUNICO 600 HOUSE #31
City-State-Zip:	CURITIBA 82220-350

Title	MGR
Name	VANZO, LUIZ FERNANDO
Address	RUA ANGELO CUNICO 600 HOUSE #31
City-State-Zip:	CURITIBA 82220-350

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: WILLIAM MOREIRA CASTILHO

MR.

03/17/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date