

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000085340

**Entity Name:** PSMF HOLDINGS LLC

**Current Principal Place of Business:**

2550 GRAND CENTRAL PKWY  
STE 12  
ORLANDO, FL 32839

**Current Mailing Address:**

2550 GRAND CENTRAL PKWY  
STE 12  
ORLANDO, FL 32839 US

**FEI Number:** 61-1763396

**Certificate of Status Desired:** No

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

GUIMARAES, GUSTAVO  
2550 GRAND CENTRAL PKWY  
STE 12  
ORLANDO, FL 32839 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 NUNES DE PAIVA, PAULO C  
Address RUA MARIO COVAS JUNIOR 50/2206  
City-State-Zip: BARRA DA TIJUCA RD 22631--030

Title MGR  
Name NUNES DE PAIVA, MARCELA V  
Address RUA MARIO COVAS JUNIOR 50/2206  
City-State-Zip: BARRA DA TIJUCA RD 22631--030

Title MGR  
Name NUNES DE PAIVA, FELIPE V  
Address RUA MARIO COVAS JUNIOR 50/2206  
City-State-Zip: BARRA DA TIJUCA RD 22631--030

Title MGR  
Name VELLOSO DE PAIVA, SOLANGE S  
Address RUA MARIO COVAS JUNIOR 50/2206  
City-State-Zip: BARRA DA TIJUCA RD 22631--030

*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:** PAULO CEZAR NUNES DE PAIVA

**MANAGER**

**02/25/2016**

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

\_\_\_\_\_  
Date