

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000182408

**Entity Name:** ALLES BLAU, LLC**Current Principal Place of Business:**8112 POINCIANA BLVD  
ORLANDO, FL 32821**Current Mailing Address:**8112 POINCIANA BLVD  
ORLANDO, FL 32821 US**FEI Number:** 38-3983324**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DOMINIUM CONSULTING SERVICES, LLC  
121 S. ORANGE AVE.  
STE. 1110  
ORLANDO, FL 32801 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 AMBR  
Name DE ARAUJO CINTRA, LUIZ ROBERTO  
Address RUA DONA LUIZA TOLLE 181 APT 222  
City-State-Zip: SAO PAULO SP 02406--000

Title AMBR  
Name BOCK CINTRA, ANA CRISTINA  
Address RUA DONA LUIZA TOLLE 181 APT 222  
City-State-Zip: SAO PAULO SP 02406--000

Title AMBR  
Name LORENCONE DE SOUZA, DANILO  
Address RUA DONA LUIZA TOLLE 181 APT 221  
City-State-Zip: SAO PAULO SP 02406--000

Title AMBR  
Name BOCK, PATRICIA  
Address RUA DONA LUIZA TOLLE 181 APT 221  
City-State-Zip: SAO PAULO SP 02406--000

*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:** PATRICIA BOCK

AMBR

03/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date