

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000110941

Entity Name: MFP USA, LLC

Current Principal Place of Business:

7901 KINGSPONTE PKWY
SUITE 17
ORLANDO, FL 32819

FILED
May 01, 2017
Secretary of State
CC4472078956

Current Mailing Address:

7901 KINGSPONTE PKWY
SUITE 17
ORLANDO, FL 32819 US

FEI Number: 30-0961224

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LARSON ACCOUNTING & CONSULTING SERVICES, LLC
7901 KINGSPONTE PKWY
SUITE 17
ORLANDO, FL 32819 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 NAVES, MARCELO E
Address RUA JOAO SEVIRIANO RODRIGUES
 DA CUNHA,860
City-State-Zip: KARAIBA UBERLANDIA, MG, BRAZIL
 38411--178

Title AMBR
Name NAVES, PEDRO A
Address RUA JOAO SEVIRIANO RODRIGUES
 DA CUNHA,860
City-State-Zip: KARAIBA UBERLANDIA, MG, BRAZIL
 38411--178

Title AMBR
Name NAVES SOUSA, FLAVIA A
Address RUA JOAO SEVIRIANO RODRIGUES
 DA CUNHA,860
City-State-Zip: KARAIBA UBERLANDIA, MG, BRAZIL
 38411--178

Title AMBR
Name NAVES, FABRICIO A
Address RUA DA CARIOCA
City-State-Zip: PATRIMO, UBERLANDIA, MG, BRAZIL
 38411--046

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: NAVES , MARCELO E

AMBR

05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date