

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000128038

Entity Name: MENDES BUSINESS LLC

Current Principal Place of Business:

7901 KINGSPONTE PARKWAY
SUITE 17
ORLANDO, FL 32819

Current Mailing Address:

7901 KINGSPONTE PARKWAY
SUITE 17
ORLANDO, FL 32819 US

FEI Number: 30-0946870

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LARSON ACCOUNTING AND CONSULTING SERVICES LLC
7901 KINGSPONTE PARKWAY
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: CAROLINE LARSON

04/30/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name MENDES MOTA, AUGUSTA MARIA
Address RUA SANTOS DUMONT 562 SALA 02
City-State-Zip: UBERLANDIA MG 38400-060

Title AMBR
Name DE OLIVEIRA SOARES, FABRICIO G
Address RUA JACAREPAGUA 150-B
City-State-Zip: UBERLANDIA MG 38413-300

Title AMBR
Name DE OLIVEIRA, JOAO BATISTA
Address RUA ALCEU ALVES MENDES 448 - B
City-State-Zip: UBERLANDIA MINAS GERAIS
38413318

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: MENDES MOTA , AUGUSTA MARIA

AMBR

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date