

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000128038

Entity Name: MENDES BUSINESS LLC**Current Principal Place of Business:**8980 SILVER PL
KISSIMMEE, FL 34747**Current Mailing Address:**2295 S. HIAWASSES RD,
STE 202
ORLANDO, FL 32835 US**FEI Number:** 30-0946870**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INTERNATIONAL DIVISION BY LARSON LLC
7901 KINGSPONTE PKWY STE 15
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 G LARSON

04/23/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

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

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

Title	MANAGER
Name	DE OLIVEIRA, JOAO BATISTA
Address	RUA ALCEU ALVES MENDES 448 - B
City-State-Zip:	UBERLANDIA MG 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

MGR

04/23/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date