

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000141982

**Entity Name:** VALADARES HOMES LLC

**Current Principal Place of Business:**

8615 COMMODITY CIRCLE SUITE 11  
11  
ORLANDO, FL 32819

**Current Mailing Address:**

8615 COMMODITY CIRCLE SUITE 11  
11  
ORLANDO, FL 32819 US

**FEI Number:** 38-4010729

**Certificate of Status Desired:** No

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

FREGNI, NILTON  
8615 COMMODITY CIRCLE SUITE 11  
11  
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:** NILTON FREGNI

03/16/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name VALADARES FERREIRA, MONICA VALERIA  
Address 2775 NE 187TH STREET STE 613  
City-State-Zip: AVENTURA FL 33180

Title AMBR  
Name FERREIRA FERNANDES, MARCELO H  
Address 2775 NE 187TH STREET STE 613  
City-State-Zip: AVENTURA FL 33180

Title AMBR  
Name VALADARES ROCHA, GABRIEL H  
Address 2775 NE 187TH STREET STE 613  
City-State-Zip: AVENTURA FL 33180

Title AMBR  
Name SILVA, ANTONIO ROCHA  
Address 2775 NE 187TH STREET STE 613  
City-State-Zip: AVENTURA FL 33180

Title AMBR  
Name VALADARES ROCHA, PEDRO HENRIQUE  
Address 2775 NE 187TH STREET STE 613  
City-State-Zip: AVENTURA FL 33180

*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:** MONICA VALERIA VALADARES FERREIRA

**DIRECTOR**

03/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date