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.

MGR

SIGNATURE: ANTONIO SILVA

Electronic Signature of Signing Authorized Person(s) Detail

201	7 FLORIDA	LIMITED	LIABILITY	COMPANY	ANNUAL	REPORT

DOCUMENT# L16000142791

Entity Name: AFS PARTICIPACAO LLC

Current Principal Place of Business:

601 BRICKELL KEY DRIVE SUITE 901 MIAMI, FL 33131

Current Mailing Address:

601 BRICKELL KEY DRIVE SUITE 901 MIAMI, FL 33131 US

FEI Number: 38-4010468

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

DRUMMOND CONSULTING LLC 601 BRICKELL KEY DRIVE SUITE 901 MIAMI, FL 33131 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:

Authorized Person(s) Detail :						
Title	MGR	Title	MBR			
Name	SILVA, ANTONIO	Name	AFS PARTICIPACAO LIMITED			
Address	RUA SETUBAL,638 APT. 2802	Address	TRIDENT CHAMBERS, PO BOX 146			
City-State-Zip:	RECIFE PE 51030-010	City-State-Zip:	ROAD TOWN TO TORTO-LA			

FILED Mar 11, 2017 Secretary of State CC4532102742

Certificate of Status Desired: Yes

03/11/2017 Date

Date