### 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: CLAUDIA RIOS SILVA

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :						
Title	MGR	Title	MGR			
Name	LEONE, FRANCESCO	Name	SILVA, CLAU			

			Elec	tron	c Sig	nature	OF R
-	-	-			_		

321 City-State-Zip: ORLANDO FL 32835

The above named	l entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in the State of F	⁼lorida.
SIGNATURE	E CLAUDIA RIOS SILVA			06/
	Electronic Signature of Registered Agent			
Authorized	Person(s) Detail :			
Title	MGR	Title	MGR	
Name	LEONE, FRANCESCO	Name	SILVA, CLAUDIA RIOS	
Address	6735 CONROY ROAD 321	Address	6735 CONROY ROAD 321	
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835	
Title	MGR			
Name	LEONE, GIOVANNI ROBERTO			
Address	6735 CONROY ROAD			

## FEI Number: 81-4759565

# Name and Address of Current Registered Agent:

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

**Current Mailing Address:** 

SILVA, CLAUDIA RIOS 6735 CONROY ROAD

ORLANDO, FL 32835 US

321

ORLANDO, FL 32835 US

# 6735 CONROY ROAD

DOCUMENT# L16000221305

Entity Name: PIZZOLO L'OTTAVO NANO LLC

# **Current Principal Place of Business:**

# 321 ORLANDO, FL 32835

6735 CONROY ROAD # 321

## Jun 23, 2020 Secretary of State 6484341881CC

Certificate of Status Desired: Yes

FILED

06/23/2020

06/23/2020 Date