

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000243773

**Entity Name:** STUDIO DEK LLC

**Current Principal Place of Business:**

16880 MATISSE DR.  
DELRAY BEACH, FL 33446

**Current Mailing Address:**

16880 MATISSE DR.  
DELRAY BEACH, FL 33446 US

**FEI Number:** 83-2286858

**Certificate of Status Desired:** Yes

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

FREIRE DE MORAIS, LUIZ DANIEL  
16880 MATISSE DR.  
DELRAY BEACH, FL 33446 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:** LUIZ DANIEL FREIRE DE MORAIS

04/16/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name CHRISTINE L ARALDI, KELLY  
Address 16880 MATISSE DR.  
City-State-Zip: DELRAY BEACH FL 33446

Title AMBR  
Name FREIRE DE MORAIS, LUIZ DANIEL  
Address 16880 MATISSE DR.  
City-State-Zip: DELRAY BEACH FL 33446

*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:** LUIZ DANIEL FREIRE DE MORAIS

MANAGING PARTNER

04/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date