

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000215434

FILED
Apr 17, 2022
Secretary of State
8250000160CC

Entity Name: JUMBADORES FERROZES INVESTING LLC

Current Principal Place of Business:

2269 VICTORIA FALLS DR
ORLANDO, FL 32824

Current Mailing Address:

2269 VICTORIA FALLS DR
ORLANDO, FL 32824 US

FEI Number: 84-2947706

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSENDO SILVA SOARES OLIVEIRA, LEONARDO ANTONIO
2269 VICTORIA FALLS DR
ORLANDO, FL 32824 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: LEONARDO ANTONIO ROSENDO SILVA SOARES OLIVEIRA 04/17/2022
Electronic Signature of Registered Agent Date

Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	ROSENDO SILVA SOARES OLIVEIRA, LEONARDO ANTONIO	Name	BELLINGHAUSEN NETO, ALBERTO EDUARDO
Address	2269 VICTORIA FALLS DR	Address	AV PRESIDENTE WILSON, 200, APT 164 C
City-State-Zip:	ORLANDO FL 32824	City-State-Zip:	SANTOS 11065-201
Title	AMBR	Title	AMBR
Name	FERRAZ BELLINGHAUSEN, MAYRA	Name	CHAVEZ VIEIRA, HELDER
Address	AV PRESIDENTE WILSON, 200, APT 164 C	Address	RUA MARMARA 97
City-State-Zip:	SANTOS 11065-201	City-State-Zip:	SAO BERNARDO DO CAMPO SP 09750-720
Title	AMBR	Title	AMBR
Name	AUGUSTO DE MATOS, MARIO	Name	DE MATOS, MARCIA CRISTINA
Address	AV BERNARDINO DE CAMPOS, 266-L	Address	AV. MAL FLORIANO PEIXOTO, 236 - APT 62
City-State-Zip:	SANTOS SP 11060-302	City-State-Zip:	SANTOS SP 11060-302
Title	AMBR	Title	AMBR
Name	DE MUZIO JUNIOR, ARNALDO	Name	SARTORELLI GARCIA, SILVIO
Address	AV DOUTOR RUDGE RAMOS, 273 - APT 816	Address	RUA RUI BARBOSA, 93 - APT 193
City-State-Zip:	SAO BERNARDO DO CAMPO SP 09637-000	City-State-Zip:	PRAIA GRANDE SP 11700-170

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: LEONARDO ANTONIO ROSENDO SILVA SOARES AMBR 04/17/2022
OLIVEIRA
Electronic Signature of Signing Authorized Person(s) Detail Date