STE 303 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	: TALITA BENDILATTI			04/26/2024
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR	
Name	GOMES CAVALCANTE, MARCIO	Name	DE SOUZA OLIVEIRA, CARINA	
Address	LEANDRO 7212 ENCHANTED LAKE DR	Address City-State-Zip:	7212 ENCHANTED LAKE DR	
City-State-Zip:	WINTER GARDEN FL 34787		WINTER GARDEN FL 34787	
Title	AMBR			
Name	MULTITEC INFORMATICA E GAMES LTDA			
Address	AV RUI BARBOSA, 275 LOJA 06			
City-State-Zip:	MACAE RJ 27910-361			

FEI Number: 84-4889950

CONNECTION CONSULTING LLC 7450 DR PHILLIPS BLVD ST ORI

DOCUMENT# L20000055380 Entity Name: R3 CAVALCANTE LLC

# **Current Principal Place of Business:**

7212 ENCHANTED LAKE DR WINTER GARDEN, FL 34787

## **Current Mailing Address:**

7212 ENCHANTED LAKE DR WINTER GARDEN, FL 34787 US

## Name and Address of Current Registered Agent:

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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: MARCIO LEANDRO GOMES CAVALCANTE

Electronic Signature of Signing Authorized Person(s) Detail

AMBR

## 04/26/2024 Date

## FILED Apr 26, 2024 Secretary of State 6490956883CC

Certificate of Status Desired: No