# SIGNATURE: ALESSANDRO RAMOS DA COSTA

that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

#### 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000423853

Entity Name: RAMOS AM ENTERPRISES USA LLC

## **Current Principal Place of Business:**

4340 S KIRKMAN RD APT 911 ORLANDO, FL 32811

#### **Current Mailing Address:**

4340 S KIRKMAN RD APT 911 ORLANDO, FL 32811 US

#### FEI Number: 88-4160943

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

WHITE CASTLE SERVICES CORP 4340 S KIRKMAN RD APT 911 ORLANDO, FL 32811 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. SIG

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Authorized	reison(s) Delan .		
Title	MGRM	Title	MGRM
Name	RAMOS DA COSTA, ALESSANDRO	Name	DE SOUZA RAMOS, MAGDA B
Address	4340 S KIRKMAN RD APT 911	Address	4340 S KIRKMAN RD APT 911
City-State-Zip:	ORLANDO FL 32811	City-State-Zip:	ORLANDO FL 32811

NATURE	E:				
	Electronic Signature of Registered Agent				
horized Person(s) Detail :					
	MGRM	Title	MGRM		
e	RAMOS DA COSTA, ALESSANDRO	Name	DE SOUZA RAMOS, MAGDA B		

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

FILED		
Apr 25, 2023		
Secretary of State		
1052566662CC		

Certificate of Status Desired: No

04/25/2023

Date

Date