

FILED
May 09, 2003 8:00 am
Secretary of State

05-09-2003 90055 020 ****50.00

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L02000022823

1. Entity Name

VERDIN, LLO



DO NOT WRITE IN THIS SPACE

10103766

2. Principal Place of Business

Quinta 91-71

Suite, Apt. #, etc.

Calle Orion Trigel Norte

City & State
Valencia, Venezuela

Zip

Country

3. Mailing Address

Apartado 2141

Suite, Apt. #, etc.

City & State
Valencia, Venezuela

Zip

Country

4. FEI Number

Applied For

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Atrium Registered Agents, Inc.

Street Address (P.O. Box Number is Not Acceptable)

1500 San Remo Avenue, Suite 125

City Coral Gables

FL

Zip Code
33146

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and fee applicable

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

MGR - Estrada, Angel
Quinta 91-71, Calle Orion Trigel Norte
Valencia Venezuela

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

MGR - Aguilera, Lyliah
Quinta 91-71, Calle Orion Trigel Norte
Valencia, Venezuela

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 688, Florida Statutes.

SIGNATURE:

Angel Estrada
ANGEL ESTRADA L

5/1/2003

SIGNATURE, PRINTED OR TYPED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE.

10/2003 (12/02)