

FILED
Jun 20, 2003 8:00 am
Secretary of State

05-05-2003 92183 049 ****50.00

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L02000022862			
1. Entity Name COSTALIN L.L.C.			
Principal Place of Business 2717 PONCE DE LEON BLVD. CORAL GABLES, FL 33134		Mailing Address 2717 PONCE DE LEON BLVD. CORAL GABLES, FL 33134	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Name and Address of Current Registered Agent DE VARONA, SERGIO CPA 304 PALERMO AVENUE CORAL GABLES, FL 33134		4. FEI Number 46-0498419 Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		FL Zip Code	
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 agents.			
SIGNATURE _____ DATE _____			
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
MGRM SCATTOLINI, MAURO 2717 PONCE DE LEON BLVD CORAL GABLES, FL 33134		MGRM CONSTANZA, PROFETA DE SCA 2717 PONCE DE LEON BLVD CORAL GABLES, FL 33134	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
MGRM CONSTANZA, PROFETA DE SCA 2717 PONCE DE LEON BLVD CORAL GABLES, FL 33134		MGRM CONSTANZA, PROFETA DE SCA 2717 PONCE DE LEON BLVD CORAL GABLES, FL 33134	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(X), 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 605, Florida Statutes.			
SIGNATURE _____ DATE 4/14/03 BY 46-0498419			

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☐ CHECK HERE IF MAKING CHANGES

CREATED (10/02)