

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000129027

Entity Name: NOVA SPECIALISTS LLC

**FILED**  
**Mar 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5750 MAJOR BLVD SUITE 240  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

5750 MAJOR BLVD SUITE 240  
ORLANDO, FL 32819 US

**New Mailing Address:**

FEI Number: 36-4714107

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SAFETY BUSINESS LLC  
6220 S ORANGE BLOSSOM TRAIL  
604  
ORLANDO, FL 32809 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SEIXAS, ANDRE P  
Address: 455 WESTPOINT GARDEN CIR  
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: MGRM  
Name: DE OLIVEIRA, ALVARO AUGUSTO N  
Address: 2357 LAKE DEBRA DR 722  
City-St-Zip: ORLANDO, FL 32835 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ALVARO AUGUSTO NOBREGA DE OLIVEIRA

MGRM

03/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date