

# 2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

09 MAY 30 AM 9:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L99000004830

1. Entity Name  
BELLO INVESCO, LLC

Principal Place of Business

7806 FERNLEAF DRIVE  
ORLANDO FL 32836

Mailing Address

7806 FERNLEAF DRIVE  
ORLANDO FL 32836-3747

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3598539

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ALIU-OTOKITI, PATRICK  
7806 FERNLEAF DRIVE  
ORLANDO FL 32836

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
MGR  
ALIU-OTOKITI, PATRICK  
7806 FERNLEAF DRIVE  
ORLANDO FL 32836

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
100003206631  
-04/13/00--01010--001  
\*\*\*\*\*213.75 \*\*\*\*\*55.00

☐ Change ☐ Addition

TITLE  
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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)(i), 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 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

4/6/00