

2000 UNIFORM BUSINESS REPORT (UBR)

L99000008568

DOCUMENT #

1. Entity Name
MARESIAS, LLC

APPROVED
AND
FILED

00 JUN -6 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
417 Water Street 417 Water Street
Celebration, Florida 34747 Celebration, Florida 34747

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 59-3633545 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
Wendy Anderson, Esquire
200 S. Orange Avenue
Suite 2300
Orlando, FL 32801

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.

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
TITLE NAME STREET ADDRESS CITY-ST-ZIP
Managing Member Emerson Rodriguez Biaggi, MGRM 417 Water Street Celebration, Florida 34747
Member Luiz Francisco Biaggi 417 Water Street Celebration, Florida 34747

10. ADDITIONS / CHANGES
TITLE NAME STREET ADDRESS CITY-ST-ZIP
4000003297384-0
-06/20/00-01861-043
*****50.00 *****50.00

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: Emerson R. Biaggi, MGRM

4/17/2000 407-566-0379

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

Date Daytime Phone #

CR2E083 (1/99)