

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P12000084227

**FILED**  
**Oct 05, 2014**  
**Secretary of State**

**Entity Name:** NASCIMENTO FINANCIAL SOLUTIONS INC

**Current Principal Place of Business:**

4095 STATE ROAD 7, STE L 201  
LAKE WORTH, FL 33449

**New Principal Place of Business:**

**Current Mailing Address:**

4095 STATE ROAD 7, STE L 201  
LAKE WORTH, FL 33449

**New Mailing Address:**

**FEI Number:** 46-1131101

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIAZ, OSVALDO J  
550 BILTMORE WAY, STE 209  
CORAL GABLES, FL 33134 US

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

OSWALDO, DIAZ J  
4095 STATE ROAD 7, STE L 201  
LAKE WORTH, FL 33449 US

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: OSWALDO J DIAZ

10/05/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: NASCIMENTO, BRUNO H  
Address: 550 BILTMORE WAY, STE 209  
City-St-Zip: CORAL GABLES, FL 33134

Title: T  
Name: BERGONZOLI, JUAN N  
Address: 4095 STATE ROAD 7, STE L 201  
City-St-Zip: LAKE WORTH, FL 33449

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JUAN N BERGONZOLI

T

10/05/2014

Electronic Signature of Signing Officer or Director

Date