

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000048357

**Entity Name:** LE PUP LLC**Current Principal Place of Business:**283 WEST ROAD  
OCOE, FL 34761**Current Mailing Address:**283 WEST ROAD  
OCOE, FL 34761 US**FEI Number:** 27-0214922**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LARSON ACCOUNTING & CONSULTING SERVICES LLC  
7901 KINGSPONTE PKWY  
STE 17  
ORLANDO, FL 32819 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:** CAROLINE LARSON

02/28/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AUTHORIZED MEMBER	Title	CEO
Name	LIMA, ROGER	Name	RIBEIRO MELO, ANDREA GOMES
Address	283 WEST ROAD	Address	6749 THORNHILL CIRCLE
City-State-Zip:	OCOE FL 34741	City-State-Zip:	WINDERMERE FL 34786
Title	AUTHORIZED MEMBER		
Name	MEDICÃO PET SHOP COMERCIO E SERVIÇO LTDA		
Address	AVENIDA ENGENHEIRO SANTANA JUNIOR 1915		
City-State-Zip:	FORTALEZA 60192-205		

*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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANDREA GOMES RIBEIRO MELO

CEO

02/28/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date