

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000096406

**FILED**  
**Mar 28, 2016**  
**Secretary of State**  
**CC2606852330**

**Entity Name:** ALEX SILVA RUAS BRAZILIAN JIU-JITSU LLC

**Current Principal Place of Business:**

4851 WEST SPENCER FIELD RD  
PACE, FL 32571

**Current Mailing Address:**

4851 WEST SPENCER FIELD  
PACE , FL 32571 US

**FEI Number:** 27-3515926

**Certificate of Status Desired:** No

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

DASILVA , ALEX S  
4851 WEST SPENCER FIELD RD  
PACE , FL 32571 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:** ALEX DASILVA

03/28/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DASILVA RUAS, ALEX  
Address 656 MOZINGO LN  
City-State-Zip: PENSACOLA FL 32514

Title MGR  
Name SILVA,, ALEX  
Address 88 MONARCH LN  
City-State-Zip: PENSACOLA FL 32504

Title MGR  
Name ALEX, SILVA  
Address 88 MONARCH LN  
City-State-Zip: PENSACOLA FL 32504

Title MGR  
Name SILVA, ALEX  
Address 88 MONARCH LN  
City-State-Zip: PENSACOLA FL 32504

Title MGR  
Name SILVA, ALEX  
Address 88 MONARCH LN  
City-State-Zip: PENSACOLA FL 32504

Title MGR  
Name SILVA, ALEX  
Address 88 MONARCH LN  
City-State-Zip: PENSACOLA FL 32504

*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:** ALEX DASILVA

**OWNER**

03/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date