

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000085601

**Entity Name:** AMERINTER USA, LLC

**Current Principal Place of Business:**

8750 EXCHANGE DR.,  
SUITE 4  
ORLANDO, FL 32809

**Current Mailing Address:**

P.O. BOX 772227  
ORLANDO, FL 32877 US

**FEI Number:** 35-2327251

**Certificate of Status Desired:** No

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

RAVELO, LOURDES  
5914 BLAKEFORD DR.  
WINDERMERE, FL 34786 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name RAVELO, LOURDES  
Address 5914 BLAKEFORD DR.  
City-State-Zip: WINDERMERE FL 34786

*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:** LOURDES RAVELO

**MANAGER**

**01/30/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date