

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000136189

**Entity Name:** MCG HOUSES FOR RENT LLC

**Current Principal Place of Business:**

5401 S KIRKMAN RD  
STE 135  
ORLANDO, FL 32819

**FILED**  
**Feb 21, 2017**  
**Secretary of State**  
**CC7382101739**

**Current Mailing Address:**

5401 S KIRKMAN RD  
STE 135  
ORLANDO, FL 32819 US

**FEI Number:** 35-2515305

**Certificate of Status Desired:** No

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

US TAX CONSULTING INC  
5401 S KIRKMAN RD  
STE 135  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title AMBR  
Name CORREIA, MARCOS  
Address ESTRADA DA BARRA DA TIJUCA 4001  
UNIT#20  
City-State-Zip: RIO DE JANEIRO RJ 22641--005

Title AMBR  
Name CORREIA, DEISE  
Address ESTRADA DA BARRA DA TIJUCA 4001  
UNIT#20  
City-State-Zip: RIO DE JANEIRO RJ 22641--005

Title AMBR  
Name CORREIA, ANA CAROLINA  
Address ESTRADA DA BARRA DA TIJUCA 4001  
UNIT#20  
City-State-Zip: RIO DE JANIERO RJ 22641--005

Title AMBR  
Name CORREIA, ANA GABRIELA  
Address ESTRADA DA BARRA DA TIJUCA 4001  
UNIT#20  
City-State-Zip: RIO DE JANEIRO RJ 22641--005

Title AMBR  
Name DOS SANTOS OLIVEIRA, MATHEUS  
ALEXAN M  
Address EST DA BARRA DA TIJUCA 4001 #22  
RIO DE  
City-State-Zip: JANIERO RJ 22641 004 BR

*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:** MARCOS CORREIA

AMBR

02/21/2017

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

\_\_\_\_\_  
Date