## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000036671

Entity Name: FONTE AZUL LLC

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**Current Principal Place of Business:** 

RUA JESUINO ARRUDA 325 AP 41

SAO PAULO, SP 04532-080

**Current Mailing Address:** 

RUA JESUINO ARRUDA 325 AP 41 SAO PAULO, SP 04532-080 BR

FEI Number: 47-3269442 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ACEVEDO ASSOCIATES PA 1395 BRICKELL AVE 8TH FLOOR MIAMI, FL 33131 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

FILED May 01, 2019

**Secretary of State** 

8967450133CC

Authorized Person(s) Detail:

AP 41

Title MGRM Title MGRM

Name GENOVESI, NILSON F Name SILVA, ROSINEIA R

Address RUA JESUINO ARRUDA 325 Address RUA JESUINO ARRUDA 325

AP 41

City-State-Zip: SAO PAULO SP 04532-080 City-State-Zip: SAO PAULO SP 04532-080

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: NILSON F GENOVESI MG

Electronic Signature of Signing Authorized Person(s) Detail

MGRM 05/01/2019

Date