

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000146758

Entity Name: COMPANY COMBO, LLC**Current Principal Place of Business:**2815 DIRECTORS ROW, STE 100
ORLANDO, FL 32809**Current Mailing Address:**2815 DIRECTORS ROW, STE 100
ORLANDO, FL 32809 US**FEI Number:** 47-4909793**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SAMPAIO, DIEGO
7345 W SAND LAKE RD
STE 210
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:** DIEGO SAMPAIO

01/22/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	DELTACARD CORP
Address	2815 DIRECTORS ROW STE 100 OFFICE 4
City-State-Zip:	ORLANDO FL 32809
Title	AP
Name	SAMPAIO, DIEGO
Address	2815 DIRECTORS ROW, STE 100
City-State-Zip:	ORLANDO FL 32809

Title	MGR
Name	DE SAMPAIO, EVANEIDE P
Address	2815 DIRECTORS ROW SUITE 100
City-State-Zip:	ORLANDO FL 32809
Title	AP
Name	MESA, KIMBERLY
Address	2815 DIRECTORS ROW, STE 100
City-State-Zip:	ORLANDO FL 32809

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: SAMPAIO , DIEGO

AP

01/22/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date