# SIGNATURE: NELTER DIMARZIO

Electronic Signature of Signing Authorized Person(s) Detail

## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000133541

Entity Name: NELTER DIMARZIO LLC

#### **Current Principal Place of Business:**

2735 N POINCIANA BLVD # 104 KISSIMMEE, FL 34746

#### **Current Mailing Address:**

2735 N POINCIANA BLVD # 104 KISSIMMEE, FL 34746

### **FEI Number: NOT APPLICABLE**

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

DIMARZIO, NELTER 2735 N POINCIANA BLVD # 104 KISSIMMEE, FL 34746 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	NELTER DIMARZIO			04/03/2019
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR	
Name	DIMARZIO, NELTER	Name	GOMES DE OLIVEIRA, GISELL	I
Address	2735 N POINCIANA BLVD # 104	Address	2735 N POINCIANA BLVD	
City-State-Zip:	KISSIMMEE FL 34746	City-State-Zip:	KISSIMMEE FL 34746	

that my name appears above, or on an attachment with all other like empowered. AMBR

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

Certificate of Status Desired: No

04/03/2019

Date