| FEI Number: 82-4899471 Name and Address of Current Registered Agent: | | | Certificate of Status Desired: No | |
|--|--|-----------------|-----------------------------------|------------|
| CSI RA LLC 15805 BISCAYNE BLVD #201 AVENTURA, FL 33160 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: PALOMA PINHA | | | | 05/15/2020 |
| | Electronic Signature of Registered Agent | | | Date |
| Authorized Person(s) Detail : | | | | |
| Title | AMBR | Title | AMBR | |
| Name | ALVES SANTOS, LUCIANO | Name | PESTANA, LUCIANA | |
| Address | 3111 N UNIVERSITY DR STE 105 | Address | 3111 N UNIVERSITY DR STE 10 | 5 |
| City-State-Zip: | CORAL SPRINGS FL 33065 | City-State-Zip: | CORAL SPRINGS FL 33065 | |

Current Mailing Address: 3111 N UNIVERSITY DR STE 105

DOCUMENT# L18000069631

3111 N UNIVERSITY DR STE 105 CORAL SPRINGS, FL 33065

Entity Name: PESTANA & SANTOS, LLC

Current Principal Place of Business:

CORAL SPRINGS, FL 33065 US

F

N

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: ALVES SANTOS, LUCIANO

Electronic Signature of Signing Authorized Person(s) Detail

05/15/2020 Date

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

AMBR