

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000278563

**Entity Name:** THREEFOLD CORD LLC

**Current Principal Place of Business:**

5301 CONROY RD  
STE 140  
ORLANDO, FL 32811

**Current Mailing Address:**

5301 CONROY RD  
STE 140  
ORLANDO, FL 32811 FL

**FEI Number:** 61-1913288

**Certificate of Status Desired:** No

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

BALBO JUNIOR, ADILSON  
5301 CONROY RD  
STE 140  
ORLANDO, FL 32811 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 MGRM  
Name BALBO JUNIOR, ADILSON  
Address RUA PEIXOTO, 9 APT 83  
City-State-Zip: SAO PAULO SP 03627--010

Title MGRM  
Name MAKOTO M TABATA, MARCELO  
Address RUA ALTINOPOLIS, 563 APT 82  
City-State-Zip: SAO PAULO SP 02334--000

Title MGRM  
Name R DA SILVA BALBO, THIAGO  
Address RUA PEIXOTO, 9 APT 43  
City-State-Zip: SAO PAULO SP 03627--010

*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:** BALBO JUNIOR , ADILSON

MGRM

04/18/2019

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

\_\_\_\_\_  
Date