2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Apr 02, 2020
Secretary of State
1803248474CC

Entity Name: FATIMA VISINTAINER COMPANY, LLC

Current Principal Place of Business:

2220 SAN VITTORINO CIRCLE
APT 36-103
KISSIMMEE, FL 34741

Current Mailing Address:

2220 SAN VITTORINO CIRCLE
APT 36-103
KISSIMMEE, FL 34741 US

FEI Number: 36-4948506

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEGIT CONSULTING SERVICES, LLC
6735 CONROY WINDERMERE RD
233
ORLANDO, FL 32835 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	AMBR
Name	BATISTA NOGUEIRA, NILCE
Address	RUA COSTA RICA, 1872, BACACHERI
City-State-Zip:	CURITIBA PR 82515--270

Title	AMBR
Name	NUNES NOGUEIRA, LUIZ ANTONIO
Address	RUA MARECHAL RAMON CASTILLA , BOTAFOGO
City-State-Zip:	RIO DE JANEIRO RJ 98168-7-76

Title	AMBR
Name	N. CALMON DE PASSOS, ELIZABETH D
Address	RUA COSTA RICA, 1922 APT 21, BACACHERI
City-State-Zip:	CURITIBA PR 82515--270

Title	AMBR
Name	DE FATIMA NOGUEIRA, ADRIANA
Address	RUA COSTA RICA, 1872, BACACHERI
City-State-Zip:	CURITIBA PR 82515--270

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: ADRIANA DE FATIMA NOGUEIRA AMBR 04/02/2020

Electronic Signature of Signing Authorized Person(s) Detail — Date