

USCIS
Attn: Change of Address
1344 Pleasants Drive
Harrisonburg, VA 22801

RE: AR-11 Alien's Change of Address Card
Applicant: Gabriel de Freitas Silva - A. Number: 226-068-578
Beneficiary: Camila Beatriz Oliveira Santos - A. Number 226-068-637

Please find enclosed the completed Form AR-11, Alien's Change of Address Card, for the applicant and the beneficiary, to update their address with USCIS.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Otavio Haverroth Silva'.

Otavio Haverroth Silva (SBN: 343486)
Attorney at Law
510-241-9336

05/20/2026



Alien's Change of Address Card

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form AR-11

NOTE: An asterisk (*) indicates a mandatory field that must be completed.

Information About You

*Family Name (Last Name)	*Given Name (First Name)	Middle Name (if applicable)
DE FREITAS SILVA	Gabriel	N/A
*Date of Birth (mm/dd/yyyy)	Alien Registration Number (A-Number) (if any)	
10/09/1999	▶ A- 2 2 6 0 6 8 5 7 8	

Information About Your Address

*Present Physical Address (No PO Boxes)

*Street Number and Name	Apt.	Ste.	Flr.	Number
810 Chadwick Ln	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
*City or Town	*State		*ZIP Code	
Bay Point	CA <input type="text"/>		94565	

Previous Physical Address

Street Number and Name	Apt.	Ste.	Flr.	Number
2358 Candlestick Ct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
City or Town	State		ZIP Code	
Antioch	CA <input type="text"/>		94509	

Mailing Address (optional)

Street Number and Name	Apt.	Ste.	Flr.	Number
PO Box 90487	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
City or Town	State		ZIP Code	
San Diego	CA <input type="text"/>		92169	

Your Signature

*Your Signature	Date of Signature (mm/dd/yyyy)
Gabriel de Freitas Silva	05/18/2026

Address Change Information and Instructions

All aliens subject to registration requirements may use this form to report a change of address within 10 days of such change. For detailed instructions on how to update your address, please visit www.uscis.gov/addresschange. The collection of this information is required by Immigration and Nationality Act (INA) section 265 (8 U.S.C. 1305). U.S. Citizenship and Immigration Services (USCIS) uses the data collected on this form for statistical and record-keeping purposes, and may share this information with other Federal, state, local, and law enforcement officials. Failure to report a change of address is punishable by fine or imprisonment and/or removal from the United States.

NOTE: This form is not evidence of identity, age, or status claimed.

IMPORTANT: If you are in immigration proceedings, you must separately notify the Immigration Court of any address changes. Filing Form AR-11 with USCIS does not update your address with the Immigration Court.

Instructions

Complete all fields on this form, sign and date the form, and mail it to:

**U.S. Department of Homeland Security
Citizenship and Immigration Services
Attn: Change of Address
1344 Pleasants Drive
Harrisonburg, VA 22801**

DHS Privacy Notice

AUTHORITIES: The information requested on this form is collected under the Immigration and Nationality Act (INA) section 265.

PURPOSE: The primary purpose for providing the requested information on this form is to report a change of address. Except for those exempted, all aliens in the U.S. are required to report any change of address or new address. DHS uses the information you provide to contact you about the immigration benefit you are seeking.

DISCLOSURE: The information you provide is mandatory. Failure to report a change of address may result in a fine, imprisonment and/or removal (8 U.S.C. sections 1227(a)(3) and 1306). Failure to comply could also jeopardize your ability to obtain a future visa or other immigration benefits.

ROUTINE USES: DHS may share the information you provide on this form with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS/USCIS-001 - Alien File, Index, and National File Tracking System and DHS/USCIS-007 - Benefits Information System] and the published privacy impact assessments [DHS/USCIS/PIA-018 Alien Change of Address Card (AR-11)] which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.



Alien's Change of Address Card

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form AR-11

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Information About You

*Family Name (Last Name)	*Given Name (First Name)	Middle Name (if applicable)
OLIVEIRA SANTOS	Camila Beatriz	N/A
*Date of Birth (mm/dd/yyyy)	Alien Registration Number (A-Number) (if any)	
03/16/2002	▶ A- 2 2 6 0 6 8 6 3 7	

Information About Your Address

***Present Physical Address (No PO Boxes)**

*Street Number and Name	Apt.	Ste.	Flr.	Number
810 Chadwick Ln	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
*City or Town	*State		*ZIP Code	
Bay Point	CA <input type="button" value="v"/>		94565	

Previous Physical Address

Street Number and Name	Apt.	Ste.	Flr.	Number
2358 Candlestick Ct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
City or Town	State		ZIP Code	
Antioch	CA <input type="button" value="v"/>		94509	

Mailing Address (optional)

Street Number and Name	Apt.	Ste.	Flr.	Number
PO Box 90487	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A
City or Town	State		ZIP Code	
San Diego	CA <input type="button" value="v"/>		92169	

Your Signature

*Your Signature	Date of Signature (mm/dd/yyyy)
<i>Camila Beatriz Oliveira Santos</i>	05/18/2026

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