Authorization for Credit Card Transactions

Department of Homeland Security

Form G-1450

How To Fill Out Form G-1450

1. Type or print legibly in black ink.
2. Complete the "**Applicant's/Petitioner's/Requester's Information**," "**Credit Card Billing Information**," and "**Credit Card Information**" sections and sign the authorization. **NOTE:** The credit card must be issued by a U.S. bank.
3. Place your Form G-1450 ON TOP of your application, petition, or request package.

NOTE: Failure to provide the requested information may result in DHS and your financial institution not accepting the payment. DHS cannot process credit card payments without an authorized signature.

NOTE: Please see the USCIS Form G-1450 website for additional information.

We recommend that you print or save a copy of your completed Form G-1450 to review in the future and for your records.

By completing this transaction, you agree that you have paid for a government service and that the filing fee, biometric services fee and all related financial transactions are final and not refundable, regardless of any action DHS takes on an application, petition, or request. You must submit all fees in the exact amounts. DHS will charge your credit card up to the amount you authorize below.

Please refer to the form(s) you are filing for additional information, or you may call the USCIS Customer Contact number at **1-800-375-5283**. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

Applicant's/Petitioner's/Requester's Information (Full Legal Name)		
Given Name (First Name) Sophia	Middle Name (if any)	Family Name (Last Name) LEHNEN RODRIGUES MIRANDA
Credit Card Billing Information (Credit Card Holder's Name as it Appears on the Card)		
Given Name (First Name)	Middle Name (if any)	Family Name (Last Name)
Credit Card Holder's Billing Address:		
Street Number and Name	Apt. Ste. Flr. ☐ ☐ ☐	Number
City or Town	State	ZIP Code
Credit Card Holder's Signature and Contact Information:		
Credit Card Holder's Signature		
Credit Card Holder's Daytime Telephone Number	Credit Card Holder's Email Address	

Credit Card Information		
Credit Card Number	**Credit Card Type:** ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover	Authorized Payment Amount $ 675 .00
Credit Card Expiration Date (mm/yyyy) CVV Code		

USCIS
Attn: I-130
P.O. Box 21700
Phoenix, AZ 85036-1700

RE: Form I-130, Petition for Alien Relative
Petitioner: Sophia Lehnen Rodrigues Miranda (A206-043-656)
Beneficiary: Gleidson Rodrigues da Silva (Spouse);

Dear Sir or Madam,

Please find enclosed Form I-130 Petition for Alien Relative and all requisite documentation, filed by counsel on behalf of **Gleidson Rodrigues da Silva**.

- **Form G-1450, Authorization for Credit Card Transactions**

- **Sophia Lehnen Rodrigues Miranda's Signed Forms:**
- Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative
- Form I-130, Petition for Alien Relative

- **Gleidson Rodrigues da Silva's Signed Forms:**
- Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative
- Form I-130A, Supplemental Information for a Spouse Beneficiary

I. **Sophia Lehnen Rodrigues Miranda's Identification Documents:**
   - Sophia Lehnen Rodrigues Miranda's Valid Passport;
   - Sophia Lehnen Rodrigues Miranda's Certificate of Naturalization;
   - Sophia Lehnen Rodrigues Miranda's Brazilian Passport;

II. **Gleidson Rodrigues da Silva's Identification Documents:**
   - Gleidson Rodrigues da Silva's Birth Certificate with English Translation;
   - Gleidson Rodrigues da Silva's Valid Passport;
   - Gleidson Rodrigues da Silva's Previous Passport with Different Name;

III. **Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva's Marriage Certificate;**

IV. **Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva's Son Birth Certificate.**

V. **Evidence of Bona Fide Marriage**
   - Sophia Lehnen Rodrigues Miranda's Personal Declaration
   - Gleidson Rodrigues da Silva's Personal Declaration with English Translation
   - Joint Bank Account - Wells Fargo Bank

- Previous Joint Lease Agreement - 1025 Cadillac Way #202 Burlingame, CA, 94010
- Driver's License Showing the Same Residential Address
- Joint Costco Membership Card

VI. Evidence of Bona Fide Marriage: Letters of Support

- Letter of Support Delivered by Terence Rodrigues Miranda with English Translation;
- Letter of Support Delivered by Francine Zancanaro Lehnen Rodrigues Miranda with English Translation;
- Letter of Support Delivered by Maricela Quijano;
- Letter of Support Delivered by Jose Antonio Rodrigues Miranda;
- Letter of Support Delivered by Luis Gustavo de Moura Queiroz;

VII. Evidence of Bona Fide Marriage: Photographic Evidence of Relationship

VIII. Gleidson Rodrigues da Silva's Notice to Appear;

Thank you for your time and consideration in this matter. Should you have any questions or concerns feel free to contact me using the information listed below.

Sincerely,



_____ Date: 10/09/2026

Otavio Haverroth Silva (Bar n. 343486)

Attorney at Law

+1 510 241 9336

Notice of Entry of Appearance as Attorney or Accredited Representative

Department of Homeland Security

DHS Form G-28
OMB No. 1615-0105
Expires 05/31/2021

Part 1. Information About Attorney or Accredited Representative

1. USCIS Online Account Number (if any)

▶ 0 0 7 4 9 2 6 2 5 4 3 8

Name of Attorney or Accredited Representative

2.a. Family Name (Last Name): HAVERROTH SILVA

2.b. Given Name (First Name): Otavio

2.c. Middle Name: N/A

Address of Attorney or Accredited Representative

3.a. Street Number and Name: PO Box 90487

3.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

3.c. City or Town: San Diego

3.d. State: CA **3.e.** ZIP Code (*USPS ZIP Code Lookup*): 92169

3.f. Province: N/A

3.g. Postal Code: N/A

3.h. Country: USA

Contact Information of Attorney or Accredited Representative

4. Daytime Telephone Number: 5102419336

5. Mobile Telephone Number (if any): 5102419336

6. Email Address (if any): otavio@legalhs.com

7. Fax Number (if any): N/A

Part 2. Eligibility Information for Attorney or Accredited Representative

Select **all applicable** items.

1.a. ☒ I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Licensing Authority: California

1.b. Bar Number (if applicable): 343486

1.c. I (select **only one** box) ☒ am not ☐ am subject to any order suspending, enjoining, restraining, disbarring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in **Part 6. Additional Information** to provide an explanation.

1.d. Name of Law Firm or Organization (if applicable): HS Law Corp

2.a. ☐ I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States and recognized by the Department of Justice in accordance with 8 CFR part 1292.

2.b. Name of Recognized Organization: N/A

2.c. Date of Accreditation (mm/dd/yyyy): N/A

3. ☐ I am associated with N/A, the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative for a limited purpose is at his or her request.

4.a. ☐ I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2).

4.b. Name of Law Student or Law Graduate: N/A

Part 3. Notice of Appearance as Attorney or Accredited Representative

If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

This appearance relates to immigration matters before (select **only one** box):

1.a. ☒ U.S. Citizenship and Immigration Services (USCIS)

1.b. List the form numbers or specific matter in which appearance is entered.

I-130

2.a. ☐ U.S. Immigration and Customs Enforcement (ICE)

2.b. List the specific matter in which appearance is entered.

N/A

3.a. ☐ U.S. Customs and Border Protection (CBP)

3.b. List the specific matter in which appearance is entered.

N/A

4. Receipt Number (if any)

► N / A

5. I enter my appearance as an attorney or accredited representative at the request of the (select **only one** box):

☐ Applicant ☒ Petitioner ☐ Requestor
☐ Beneficiary/Derivative ☐ Respondent (ICE, CBP)

Information About Client (Applicant, Petitioner, Requestor, Beneficiary or Derivative, Respondent, or Authorized Signatory for an Entity)

6.a. Family Name (Last Name): LEHNEN RODRIGUES MIRANDA

6.b. Given Name (First Name): Sophia

6.c. Middle Name: N/A

7.a. Name of Entity (if applicable)

N/A

7.b. Title of Authorized Signatory for Entity (if applicable)

N/A

8. Client's USCIS Online Account Number (if any)

► N/A

9. Client's Alien Registration Number (A-Number) (if any)

► A- 2 0 6 0 4 3 6 5 6

Client's Contact Information

10. Daytime Telephone Number

+1 (415) 629-1994

11. Mobile Telephone Number (if any)

+1 (415) 629-1994

12. Email Address (if any)

sophialrmiranda6@gmail.com

Mailing Address of Client

NOTE: Provide the client's mailing address. **Do not** provide the business mailing address of the attorney or accredited representative **unless** it serves as the safe mailing address on the application or petition being filed with this Form G-28.

13.a. Street Number and Name: PO Box 90487

13.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

13.c. City or Town: San Diego

13.d. State: CA **13.e.** ZIP Code: 92169

13.f. Province: N/A

13.g. Postal Code: N/A

13.h. Country

USA

Part 4. Client's Consent to Representation and Signature

Consent to Representation and Release of Information

I have requested the representation of and consented to being represented by the attorney or accredited representative named in **Part 1.** of this form. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named attorney or accredited representative of any records pertaining to me that appear in any system of records of USCIS, ICE, or CBP.

Part 4. Client's Consent to Representation and Signature (continued)

Options Regarding Receipt of USCIS Notices and Documents

USCIS will send notices to both a represented party (the client) and his, her, or its attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select **all applicable** items below. You may change these elections through written notice to USCIS.

1.a. ☒ I request that USCIS send original notices on an application or petition to the business address of my attorney or accredited representative as listed in this form.

1.b. ☒ I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).

NOTE: If your notice contains Form I-94, Arrival-Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, select **Item Number 1.c.**

1.c. ☐ I request that USCIS send my notice containing Form I-94 to me at my U.S. mailing address.

Signature of Client or Authorized Signatory for an Entity

2.a. Signature of Client or Authorized Signatory for an Entity

➡ Sophia Johnn Rodrigues Miranda

2.b. Date of Signature (mm/dd/yyyy) 09/21/2026

Part 5. Signature of Attorney or Accredited Representative

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. a. Signature of Attorney or Accredited Representative

1.b. Date of Signature (mm/dd/yyyy) 09/21/2026

2.a. Signature of Law Student or Law Graduate

2.b. Date of Signature (mm/dd/yyyy)

Part 6. Additional Information

If you need extra space to provide any additional information within this form, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this form or attach a separate sheet of paper. Type or print your name at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a Family Name (Last Name): LEHNEN RODRIGUES MIRANDA

1.b. Given Name (First Name): Sophia

1.c. Middle Name: N/A

2.a. Page Number **2.b.** Part Number **2.c.** Item Number

2.d. N/A

3.a. Page Number **3.b.** Part Number **3.c.** Item Number

3.d. N/A

4.a. Page Number **4.b.** Part Number **4.c.** Item Number

4.d. N/A

5.a. Page Number **5.b.** Part Number **5.c.** Item Number

5.d. N/A

6.a. Page Number **6.b.** Part Number **6.c.** Item Number

6.d. N/A

Petition for Alien Relative

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

USCIS
Form I-130
OMB No. 1615-0012
Expires 02/28/2027

For USCIS Use Only	Fee Stamp	Action Stamp
A-Number A-		
Initial Receipt		
Resubmitted		
Relocated	**Section of Law/Visa Category**	
Received	☐ 201(b) Spouse - IR-1/CR-1 ☐ 203(a)(1) Unm. S/D - F1-1 ☐ 203(a)(2)(B) Unm. S/D - F2-4	
Sent	☐ 201(b) Child - IR-2/CR-2 ☐ 203(a)(2)(A) Spouse - F2-1 ☐ 203(a)(3) Married S/D - F3-1	
Completed	☐ 201(b) Parent - IR-5 ☐ 203(a)(2)(A) Child - F2-2 ☐ 203(a)(4) Brother/Sister - F4-1	

Approved	Petition was filed on (Priority Date mm/dd/yyyy):	☐ Field Investigation	☐ Personal Interview	☐ 204(a)(2)(A) Resolved
Returned	PDR request granted/denied - New priority date (mm/dd/yyyy):	☐ Previously Forwarded	☐ Pet. A-File Reviewed	☐ I-485 Filed Simultaneously
		☐ 203(g) Resolved	☐ Ben. A-File Reviewed	☐ 204(g) Resolved
Remarks				

At which USCIS office (e.g., NBC, VSC, LOS, CRO) was Form I-130 adjudicated? _____

To be completed by an attorney or accredited representative (if any).

☒ **Select this box if Form G-28 is attached.**	**Volag Number** (if any)	**Attorney State Bar Number** (if applicable)	**Attorney or Accredited Representative USCIS Online Account Number** (if any)
	N/A	343486	007492625438

► **START HERE - Type or print in black ink.**

If you need extra space to complete any section of this petition, use the space provided in **Part 9. Additional Information. Complete and submit as many copies of Part 9., as necessary, with your petition.**

Part 1. Relationship (You are the Petitioner. Your relative is the Beneficiary)

1. I am filing this petition for my (Select **only one** box):

☒ Spouse ☐ Parent ☐ Brother/Sister ☐ Child

2. If you are filing this petition for your child or parent, select the box that describes your relationship (Select **only one** box):

☐ Child was born to parents who were married to each other at the time of the child's birth

☐ Stepchild/Stepparent

☐ Child was born to parents who were not married to each other at the time of the child's birth

☐ Child was adopted (not an Orphan or Hague Convention adoptee)

3. If the beneficiary is your brother/sister, are you related by adoption? ☐ Yes ☐ No

4. Did you gain lawful permanent resident status or citizenship through adoption? ☐ Yes ☒ No

Part 2. Information About You (Petitioner)

1. Alien Registration Number (A-Number) (if any)
► A- 206043656

2. USCIS Online Account Number (if any)
► N/A

3. U.S. Social Security Number (if any)
► 861883533

Your Full Name

4.a. Family Name (Last Name): LEHNEN RODRIGUES MIRANDA

4.b. Given Name (First Name): Sophia

4.c. Middle Name: N/A

Part 2. Information About You (Petitioner) (continued)

Other Names Used (if any)

Provide all other names you have ever used, including aliases, maiden name, and nicknames.

5.a. Family Name (Last Name): N/A

5.b. Given Name (First Name): N/A

5.c. Middle Name: N/A

Other Information

6. City/Town/Village of Birth: Goiania

7. Country of Birth: Brazil

8. Date of Birth (mm/dd/yyyy): 12/20/1999

9. Sex ☐ Male ☒ Female

Mailing Address

(USPS ZIP Code Lookup)

10.a. In Care Of Name: Otavio Haverroth Silva

10.b. Street Number and Name: PO Box 90487

10.c. ☐ Apt. ☐ Ste. ☐ Flr.

10.d. City or Town: San Diego

10.e. State: CA **10.f.** ZIP Code: 92169

10.g. Province:

10.h. Postal Code:

10.i. Country: USA

11. Is your current mailing address the same as your physical address? ☐ Yes ☒ No

If you answered "No" to **Item Number 11.**, provide information on your physical address in **Item Numbers 12.a. - 13.b.**

Address History

Provide your physical addresses for the last five years, whether inside or outside the United States. Provide your current address first if it is different from your mailing address in **Item Numbers 10.a. - 10.i.**

Physical Address 1

12.a. Street Number and Name: 670 Gellert Blvd

12.b. ☐ Apt. ☐ Ste. ☐ Flr.

12.c. City or Town: Daly City

12.d. State: CA **12.e.** ZIP Code: 94015

12.f. Province: N/A

12.g. Postal Code: N/A

12.h. Country: USA

13.a. Date From (mm/dd/yyyy): 10/28/2024

13.b. Date To (mm/dd/yyyy): PRESENT

Physical Address 2

14.a. Street Number and Name: 1025 Cadillac Way

14.b. ☐ Apt. ☐ Ste. ☐ Flr.

14.c. City or Town: Burlingame

14.d. State: CA **14.e.** ZIP Code: 94010

14.f. Province: N/A

14.g. Postal Code: N/A

14.h. Country: USA

15.a. Date From (mm/dd/yyyy): 10/28/2023

15.b. Date To (mm/dd/yyyy): 10/27/2024

Your Marital Information

16. How many times have you been married? ▶ 1

17. Current Marital Status

☐ Single, Never Married ☒ Married ☐ Divorced

☐ Widowed ☐ Separated ☐ Annulled

Part 2. Information About You (Petitioner) (continued)

18. Date of Current Marriage (if currently married) (mm/dd/yyyy) 03/21/2026

Place of Your Current Marriage (if married)

19.a. City or Town: San Mateo

19.b. State: CA

19.c. Province: San Mateo

19.d. Country: USA

Names of All Your Spouses (if any)

Provide information on your current spouse (if currently married) first and then list all your prior spouses (if any).

Spouse 1

20.a. Family Name (Last Name): RODRIGUES DA SILVA

20.b. Given Name (First Name): Gleidson

20.c. Middle Name: N/A

21. Date Marriage Ended (mm/dd/yyyy): N/A

Spouse 2

22.a. Family Name (Last Name): N/A

22.b. Given Name (First Name): N/A

22.c. Middle Name: N/A

23. Date Marriage Ended (mm/dd/yyyy): N/A

Information About Your Parents

Parent 1's Information

Full Name of Parent 1

24.a. Family Name (Last Name): RODRIGUES MIRANDA

24.b. Given Name (First Name): Terence

24.c. Middle Name: N/A

25. Date of Birth (mm/dd/yyyy): 10/01/1974

26. Sex ☒ Male ☐ Female

27. Country of Birth: Brazil

28. City/Town/Village of Residence: Goiania

29. Country of Residence: USA

Parent 2's Information

Full Name of Parent 2

30.a. Family Name (Last Name): ZANCANARO LEHNEN RODRIGUES MIRANDA

30.b. Given Name (First Name): Francine

30.c. Middle Name: N/A

31. Date of Birth (mm/dd/yyyy): 04/19/1977

32. Sex ☐ Male ☒ Female

33. Country of Birth: Brazil

34. City/Town/Village of Residence: Cruz Alta

35. Country of Residence: USA

Additional Information About You (Petitioner)

36. I am a (Select **only one** box):
☒ U.S. Citizen ☐ Lawful Permanent Resident

If you are a U.S. citizen, complete Item Number 37.

37. My citizenship was acquired through (Select **only one** box):
☐ Birth in the United States
☒ Naturalization
☐ Parents

38. Have you obtained a Certificate of Naturalization or a Certificate of Citizenship? ☒ Yes ☐ No

If you answered "Yes" to **Item Number 38.**, complete the following:

39.a. Certificate Number: 44973861

39.b. Place of Issuance: San Francisco

39.c. Date of Issuance (mm/dd/yyyy): 09/26/2023

Part 2. Information About You (Petitioner) (continued)

If you are a lawful permanent resident, complete **Item Numbers 40.a. - 41.**

40.a. Class of Admission

N/A

40.b. Date of Admission (mm/dd/yyyy) N/A

Place of Admission

40.c. City or Town

N/A

40.d State

41. Did you gain lawful permanent resident status through marriage to a U.S. citizen or lawful permanent resident?

☐ Yes ☐ No

Employment History

Provide your employment history for the last five years, whether inside or outside the United States. Provide your current employment first. If you are currently unemployed, type or print "Unemployed" in **Item Number 42.**

Employer 1

42. Name of Employer/Company

Buddies Kingdom Daycare

43.a. Street Number and Name 670 Gellert Blvd

43.b. ☐ Apt. ☐ Ste. ☐ Flr.

43.c. City or Town Daly City

43.d. State CA **43.e.** ZIP Code 94015

43.f. Province N/A

43.g. Postal Code N/A

43.h. Country

USA

44. Your Occupation

Daycare Provider

45.a. Date From (mm/dd/yyyy) 08/2025

45.b. Date To (mm/dd/yyyy) PRESENT

Employer 2

46. Name of Employer/Company

Laleh Vakili Pediatric DMD

47.a. Street Number and Name 177 Bovet Rd

47.b. ☐ Apt. ☒ Ste. ☐ Flr. 180 FL 1

47.c. City or Town San Mateo

47.d. State CA **47.e.** ZIP Code 94402

47.f. Province N/A

47.g. Postal Code N/A

47.h. Country

USA

48. Your Occupation

Registered Dental Assistant

49.a. Date From (mm/dd/yyyy) 08/2019

49.b. Date To (mm/dd/yyyy) 08/2025

Part 3. Biographic Information

NOTE: Provide the biographic information about you, the petitioner.

1. Ethnicity (Select **only one** box)

☒ Hispanic or Latino
☐ Not Hispanic or Latino

2. Race (Select **all applicable** boxes)

☒ White
☐ Asian
☐ Black or African American
☐ American Indian or Alaska Native
☐ Native Hawaiian or Other Pacific Islander

3. Height Feet 5 Inches 11

4. Weight Pounds 2 1 3

5. Eye Color (Select **only one** box)

☐ Black ☐ Blue ☒ Brown
☐ Gray ☐ Green ☐ Hazel
☐ Maroon ☐ Pink ☐ Unknown/Other

Part 3. Biographic Information (continued)

6. Hair Color (Select **only one** box)

- ☐ Bald (No hair)
- ☐ Black
- ☐ Blond
- ☒ Brown
- ☐ Gray
- ☐ Red
- ☐ Sandy
- ☐ White
- ☐ Unknown/Other

Part 4. Information About Beneficiary

1. Alien Registration Number (A-Number) (if any)

► **A-** 2 0 3 7 5 8 0 8 4

2. USCIS Online Account Number (if any)

► N / A

3. U.S. Social Security Number (if any)

► N / A

Beneficiary's Full Name

4.a. Family Name (Last Name): RODRIGUES DA SILVA

4.b. Given Name (First Name): Gleidson

4.c. Middle Name: N/A

Other Names Used (if any)

Provide all other names the beneficiary has ever used, including aliases, maiden name, and nicknames.

5.a. Family Name (Last Name): SILVA ANTUNES

5.b. Given Name (First Name): Gleidson

5.c. Middle Name: N/A

Other Information About Beneficiary

6. City/Town/Village of Birth: Rondonia

7. Country of Birth: Brazil

8. Date of Birth (mm/dd/yyyy): 09/16/2001

9. Sex ☒ Male ☐ Female

10. Has anyone else ever filed a petition for the beneficiary?

☐ Yes ☒ No ☐ Unknown

NOTE: Select "Unknown" *only* if you do not know, and the beneficiary also does not know, if anyone else has ever filed a petition for the beneficiary.

Beneficiary's Physical Address

If the beneficiary lives outside the United States in a home without a street number or name, leave **Item Numbers 11.a.** and **11.b.** blank.

11.a. Street Number and Name: 670 Gellert Blvd

11.b. ☐ Apt. ☐ Ste. ☐ Flr.

11.c. City or Town: Daly City

11.d. State: CA **11.e.** ZIP Code: 94015

11.f. Province: N/A

11.g. Postal Code: N/A

11.h. Country: USA

Other Address and Contact Information

Provide the address in the United States where the beneficiary intends to live, if different from **Item Numbers 11.a. - 11.h.** If the address is the same, type or print "SAME" in **Item Number 12.a.**

12.a Street Number and Name: SAME

12.b. ☐ Apt. ☐ Ste. ☐ Flr.

12.c. City or Town

12.d. State **12.e.** ZIP Code

Provide the beneficiary's address outside the United States, if different from **Item Numbers 11.a. - 11.h.** If the address is the same, type or print "SAME" in **Item Number 13.a.**

13.a. Street Number and Name: N/A

13.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

13.c. City or Town: N/A

13.d. Province: N/A

13.e. Postal Code: N/A

13.f. Country: N/A

14. Daytime Telephone Number (if any): 6507405370

Part 4. Information About Beneficiary (continued)

15. Mobile Telephone Number (if any)
6507405370

16. Email Address (if any)
gleidsonrd32@gmail.com

Beneficiary's Marital Information

17. How many times has the beneficiary been married? ▶ 1

18. Current Marital Status

☐ Single, Never Married ☒ Married ☐ Divorced
☐ Widowed ☐ Separated ☐ Annulled

19. Date of Current Marriage (if currently married) (mm/dd/yyyy) 03/21/2026

Place of Beneficiary's Current Marriage (if married)

20.a. City or Town: San Mateo

20.b. State: CA

20.c. Province: San Mateo

20.d. Country: USA

Names of Beneficiary's Spouses (if any)

Provide information on the beneficiary's current spouse (if currently married) first and then list all the beneficiary's prior spouses (if any).

Spouse 1

21.a. Family Name (Last Name): LEHNEN RODRIGUES MIRANDA

21.b. Given Name (First Name): Sophia

21.c. Middle Name: N/A

22. Date Marriage Ended (mm/dd/yyyy): N/A

Spouse 2

23.a. Family Name (Last Name): N/A

23.b. Given Name (First Name): N/A

23.c. Middle Name: N/A

24. Date Marriage Ended (mm/dd/yyyy): N/A

Information About Beneficiary's Family

Provide information about the beneficiary's spouse and children.

Person 1

25.a. Family Name (Last Name): LEHNEN RODRIGUES MIRANDA

25.b. Given Name (First Name): Sophia

25.c. Middle Name: N/A

26. Relationship: Spouse

27. Date of Birth (mm/dd/yyyy): 12/20/1999

28. Country of Birth: Brazil

Person 2

29.a. Family Name (Last Name): LEHNEN RODRIGUES

29.b. Given Name (First Name): Arthur

29.c. Middle Name: N/A

30. Relationship: Biological Child

31. Date of Birth (mm/dd/yyyy): 08/08/2024

32. Country of Birth: USA

Person 3

33.a. Family Name (Last Name): N/A

33.b. Given Name (First Name): N/A

33.c. Middle Name: N/A

34. Relationship: N/A

35. Date of Birth (mm/dd/yyyy): N/A

36. Country of Birth: N/A

Part 4. Information About Beneficiary (continued)

Person 4

37.a. Family Name (Last Name): N/A

37.b. Given Name (First Name): N/A

37.c. Middle Name: N/A

38. Relationship: N/A

39. Date of Birth (mm/dd/yyyy): N/A

40. Country of Birth: N/A

Person 5

41.a. Family Name (Last Name): N/A

41.b. Given Name (First Name): N/A

41.c. Middle Name: N/A

42. Relationship: N/A

43. Date of Birth (mm/dd/yyyy): N/A

44. Country of Birth: N/A

Beneficiary's Entry Information

45. Was the beneficiary **EVER** in the United States? ☒ Yes ☐ No

If the beneficiary is currently in the United States, complete **Items Numbers 46.a. - 46.d.**

46.a. He or she arrived as a (Class of Admission): EWI - ENTRY WITHOUT INSPECTION

46.b. Form I-94 Arrival-Departure Record Number: ▶ N / A

46.c. Date of Arrival (mm/dd/yyyy): 06/12/2019

46.d. Date authorized stay expired, or will expire, as shown on Form I-94 or Form I-95 (mm/dd/yyyy) or type or print "D/S" for Duration of Status: N/A

47. Passport Number: FZ337213

48. Travel Document Number: N/A

49. Country of Issuance for Passport or Travel Document: Brazil

50. Expiration Date for Passport or Travel Document (mm/dd/yyyy): 05/16/2024

Beneficiary's Employment Information

Provide the beneficiary's current employment information (if applicable), even if they are employed outside of the United States. If the beneficiary is currently unemployed, type or print "Unemployed" in **Item Number 51.a.**

51.a. Name of Current Employer (if applicable): Self Employed

51.b. Street Number and Name: N/A

51.c. ☐ Apt. ☐ Ste. ☐ Flr. N/A

51.d. City or Town: N/A

51.e. State: CA **51.f.** ZIP Code: N/A

51.g. Province: N/A

51.h. Postal Code: N/A

51.i. Country: USA

52. Date Employment Began (mm/dd/yyyy): 07/2019

Additional Information About Beneficiary

53. Was the beneficiary **EVER** in immigration proceedings? ☒ Yes ☐ No

54. If you answered "Yes," select the type of proceedings and provide the location and date of the proceedings.

☒ Removal ☐ Exclusion/Deportation

☐ Rescission ☐ Other Judicial Proceedings

55.a. City or Town: San Francisco

55.b. State: CA

56. Date (mm/dd/yyyy): 01/31/2020

Part 4. Information About Beneficiary (continued)

If the beneficiary's native written language does not use Roman letters, type or print his or her name and foreign address in their native written language.

57.a. Family Name (Last Name): N/A

57.b. Given Name (First Name): N/A

57.c. Middle Name: N/A

58.a. Street Number and Name: N/A

58.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

58.c. City or Town: N/A

58.d. Province: N/A

58.e. Postal Code: N/A

58.f. Country: N/A

If filing for your spouse, provide the last address at which you physically lived together. If you never lived together, type or print, "Never lived together" in Item Number 59.a.

59.a. Street Number and Name: 670 Gellert Blvd

59.b. ☐ Apt. ☐ Ste. ☐ Flr.

59.c. City or Town: Daly City

59.d. State: CA **59.e.** ZIP Code: 94015

59.f. Province: N/A

59.g. Postal Code: N/A

59.h. Country: USA

60.a. Date From (mm/dd/yyyy): 08/23/2025

60.b. Date To (mm/dd/yyyy): Present

The beneficiary is in the United States and will apply for adjustment of status to that of a lawful permanent resident at the U.S. Citizenship and Immigration Services (USCIS) office in:

61.a. City or Town: N/A

61.b. State:

The beneficiary will not apply for adjustment of status in the United States, but he or she will apply for an immigrant visa abroad at the U.S. Embassy or U.S. Consulate in:

62.a. City or Town: Rio de Janeiro

62.b. Province: Rio de Janeiro

62.c. Country: Brazil

NOTE: Choosing a U.S. Embassy or U.S. Consulate outside the country of the beneficiary's last residence does not guarantee that it will accept the beneficiary's case for processing. In these situations, the designated U.S. Embassy or U.S. Consulate has discretion over whether or not to accept the beneficiary's case.

Part 5. Other Information

1. Have you **EVER** previously filed a petition for this beneficiary or any other alien? ☐ Yes ☒ No

If you answered "Yes," provide the name, place, date of filing, and the result.

2.a. Family Name (Last Name): N/A

2.b. Given Name (First Name): N/A

2.c. Middle Name: N/A

3.a. City or Town: N/A

3.b. State: N/A

4. Date Filed (mm/dd/yyyy): N/A

5. Result (for example, approved, denied, withdrawn): N/A

If you are also submitting separate petitions for other relatives, provide the names of and your relationship to each relative.

Relative 1

6.a. Family Name (Last Name): N/A

6.b. Given Name (First Name): N/A

6.c. Middle Name: N/A

7. Relationship: N/A

Part 5. Other Information (continued)

Relative 2

8.a. Family Name (Last Name): N/A

8.b. Given Name (First Name): N/A

8.c. Middle Name: N/A

9. Relationship: N/A

WARNING: USCIS investigates the claimed relationships and verifies the validity of documents you submit. If you falsify a family relationship to obtain a visa, USCIS may seek to have you criminally prosecuted.

PENALTIES: By law, you may be imprisoned for up to 5 years or fined $250,000, or both, for entering into a marriage contract in order to evade any U.S. immigration law. In addition, you may be fined up to $10,000 and imprisoned for up to 5 years, or both, for knowingly and willfully falsifying or concealing a material fact or using any false document in submitting this petition.

Part 6. Petitioner's Statement, Contact Information, Declaration, and Signature

NOTE: Read the **Penalties** section of the Form I-130 Instructions before completing this part.

Petitioner's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

1.a. ☒ I can read and understand English, and I have read and understand every question and instruction on this petition and my answer to every question.

1.b. ☐ The interpreter named in **Part 7.** read to me every question and instruction on this petition and my answer to every question in N/A, a language in which I am fluent. I understood all of this information as interpreted.

2. ☒ At my request, the preparer named in **Part 8.**, Otavio Haverroth Silva, prepared this petition for me based only upon information I provided or authorized.

Petitioner's Contact Information

3. Petitioner's Daytime Telephone Number: 4156291994

4. Petitioner's Mobile Telephone Number (if any): 4156291994

5. Petitioner's Email Address (if any): Sophialrmiranda6@gmail.com

Petitioner's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.

I further authorize release of information contained in this petition, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

1) I provided or authorized all of the information contained in, and submitted with, my petition;

2) I reviewed and understood all of the information in, and submitted with, my petition; and

3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my petition and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my petition, and that all of this information is complete, true, and correct.

Petitioner's Signature

6.a. Petitioner's Signature (sign in ink): Sophia Lehnen Rodrigues Miranda

6.b. Date of Signature (mm/dd/yyyy): 09/21/2026

NOTE TO ALL PETITIONERS: If you do not completely fill out this petition or fail to submit required documents listed in the Instructions, USCIS may deny your petition.

Part 7. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter if you used one.

Interpreter's Full Name

1.a. Interpreter's Family Name (Last Name)

N/A

1.b. Interpreter's Given Name (First Name)

N/A

2. Interpreter's Business or Organization Name (if any)

N/A

Interpreter's Mailing Address

3.a. Street Number and Name: N/A

3.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

3.c. City or Town: N/A

3.d. State: N/A **3.e.** ZIP Code: N/A

3.f. Province: N/A

3.g. Postal Code: N/A

3.h. Country

N/A

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

N/A

5. Interpreter's Mobile Telephone Number (if any)

N/A

6. Interpreter's Email Address (if any)

N/A

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and N/A, which is the same language provided in **Part 6.**, **Item Number 1.b.**, and I have read to this petitioner in the identified language every question and instruction on this petition and his or her answer to every question. The petitioner informed me that he or she understands every instruction, question, and answer on the petition, including the **Petitioner's Declaration and Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature (sign in ink)

7.b. Date of Signature (mm/dd/yyyy) N/A

Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner

Provide the following information about the preparer.

Preparer's Full Name

1.a. Preparer's Family Name (Last Name)

HAVERROTH SILVA

1.b. Preparer's Given Name (First Name)

Otavio

2. Preparer's Business or Organization Name (if any)

HS Law Corp

Preparer's Mailing Address

3.a. Street Number and Name: PO Box 90487

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town: San Diego

3.d. State: CA **3.e.** ZIP Code: 92169

3.f. Province

3.g. Postal Code

3.h. Country

USA

Part 8. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner (continued)

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

5102419336

5. Preparer's Mobile Telephone Number (if any)

5102419336

6. Preparer's Email Address (if any)

otavio@legalhs.com

Preparer's Statement

7.a. ☐ I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and with the petitioner's consent.

7.b. ☒ I am an attorney or accredited representative and my representation of the petitioner in this case ☒ extends ☐ does not extend beyond the preparation of this petition.

NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this petition, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this petition.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this petition at the request of the petitioner. The petitioner then reviewed this completed petition and informed me that he or she understands all of the information contained in, and submitted with, his or her petition, including the **Petitioner's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this petition based only on information that the petitioner provided to me or authorized me to obtain or use.

Preparer's Signature

8.a. Preparer's Signature (Sign in ink)



8.b. Date of Signature (mm/dd/yyyy) 09/21/2026

Part 9. Additional Information

If you need extra space to provide any additional information within this petition, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this petition or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name): LEHNEN RODRIGUES MIRANDA

1.b. Given Name (First Name): Sophia

1.c. Middle Name: N/A

2. A-Number (if any) ► A-206043656

3.a. Page Number: 2 **3.b.** Part Number: 2 **3.c.** Item Number: 12.a

3.d.

Other Addresses:

3) 670 Gellert Blv, Daly City CA 94015

USA - Date From: 01/01/2022 To: 10/28/2023

4) 1721 Park View Drive, San Bruno CA 94066

USA - Date From: 06/2017 To: 01/01/2022

4.a. Page Number: 5 **4.b.** Part Number: 5.a **4.c.** Item Number: 4

4.d.

The beneficiary entered the United States in 2019 at the age of 17 using the name "Gleidson Silva Antunes," which appeared on his passport at the time. The beneficiary was a minor and was unaware that his name had been changed on his passport. He did not request or knowingly authorize the use of this name and did not intend to misrepresent his identity. His current legal name is Gleidson Rodrigues da Silva.

5.a. Page Number: 7 **5.b.** Part Number: 4 **5.c.** Item Number: 53

5.d.

Removal proceedings were initiated against the Beneficiary following his entry into the United States on or about June 12, 2019. He was charged with removability under INA § 212(a)(6)(A). However, the Beneficiary did not receive the required statutory notice of the proceedings and the scheduled hearing.As a result, he was unable to appear at the scheduled hearing, and the Immigration Court entered an in absentia order of removal. A Motion to Reopen and Rescind the in absentia removal order was filed on the Beneficiary's behalf pursuant to INA § 240(b)(5)(C)(ii), 8 U.S.C. § 1229a(b)(5)(C)(ii), and 8 C.F.R. § 1003.23(b)(4)(ii), based on his lack of proper notice.

6.a. Page Number: 7 **6.b.** Part Number: 4 **6.c.** Item Number: 53

6.d.

The Motion is currently pending adjudication by the Immigration Judge. Pursuant to INA § 240(b)(5)(C), the Beneficiary's removal is stayed pending adjudication of the Motion.

7.a. Page Number: **7.b.** Part Number: **7.c.** Item Number:

7.d.

N/A

Notice of Entry of Appearance as Attorney or Accredited Representative

Department of Homeland Security

DHS Form G-28
OMB No. 1615-0105
Expires 05/31/2021

Part 1. Information About Attorney or Accredited Representative

1. USCIS Online Account Number (if any)

▶ 0 0 7 4 9 2 6 2 5 4 3 8

Name of Attorney or Accredited Representative

2.a. Family Name (Last Name): HAVERROTH SILVA

2.b. Given Name (First Name): Otavio

2.c. Middle Name: N/A

Address of Attorney or Accredited Representative

3.a. Street Number and Name: PO Box 90487

3.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

3.c. City or Town: San Diego

3.d. State: CA **3.e.** ZIP Code (*USPS ZIP Code Lookup*): 92169

3.f. Province: N/A

3.g. Postal Code: N/A

3.h. Country: USA

Contact Information of Attorney or Accredited Representative

4. Daytime Telephone Number: 5102419336

5. Mobile Telephone Number (if any): 5102419336

6. Email Address (if any): otavio@legalhs.com

7. Fax Number (if any): N/A

Part 2. Eligibility Information for Attorney or Accredited Representative

Select **all applicable** items.

1.a. ☒ I am an attorney eligible to practice law in, and a member in good standing of, the bar of the highest courts of the following states, possessions, territories, commonwealths, or the District of Columbia. If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

Licensing Authority: California

1.b. Bar Number (if applicable): 343486

1.c. I (select **only one** box) ☒ am not ☐ am subject to any order suspending, enjoining, restraining, disbarring, or otherwise restricting me in the practice of law. If you are subject to any orders, use the space provided in **Part 6. Additional Information** to provide an explanation.

1.d. Name of Law Firm or Organization (if applicable): HS Law Corp

2.a. ☐ I am an accredited representative of the following qualified nonprofit religious, charitable, social service, or similar organization established in the United States and recognized by the Department of Justice in accordance with 8 CFR part 1292.

2.b. Name of Recognized Organization: N/A

2.c. Date of Accreditation (mm/dd/yyyy): N/A

3. ☐ I am associated with N/A, the attorney or accredited representative of record who previously filed Form G-28 in this case, and my appearance as an attorney or accredited representative for a limited purpose is at his or her request.

4.a. ☐ I am a law student or law graduate working under the direct supervision of the attorney or accredited representative of record on this form in accordance with the requirements in 8 CFR 292.1(a)(2).

4.b. Name of Law Student or Law Graduate: N/A

Part 3. Notice of Appearance as Attorney or Accredited Representative

If you need extra space to complete this section, use the space provided in **Part 6. Additional Information**.

This appearance relates to immigration matters before (select **only one** box):

1.a. ☒ U.S. Citizenship and Immigration Services (USCIS)

1.b. List the form numbers or specific matter in which appearance is entered.

I-130A

2.a. ☐ U.S. Immigration and Customs Enforcement (ICE)

2.b. List the specific matter in which appearance is entered.

N/A

3.a. ☐ U.S. Customs and Border Protection (CBP)

3.b. List the specific matter in which appearance is entered.

N/A

4. Receipt Number (if any)

► N / A

5. I enter my appearance as an attorney or accredited representative at the request of the (select **only one** box):

☐ Applicant ☐ Petitioner ☐ Requestor

☒ Beneficiary/Derivative ☐ Respondent (ICE, CBP)

Information About Client (Applicant, Petitioner, Requestor, Beneficiary or Derivative, Respondent, or Authorized Signatory for an Entity)

6.a. Family Name (Last Name): RODRIGUES DA SILVA

6.b. Given Name (First Name): Gleidson

6.c. Middle Name: N/A

7.a. Name of Entity (if applicable)

N/A

7.b. Title of Authorized Signatory for Entity (if applicable)

N/A

8. Client's USCIS Online Account Number (if any)

► N/A

9. Client's Alien Registration Number (A-Number) (if any)

► A- 2 0 3 7 5 8 0 8 4

Client's Contact Information

10. Daytime Telephone Number

650 740 5370

11. Mobile Telephone Number (if any)

650 740 5370

12. Email Address (if any)

gleidsonantunes@icloud.com

Mailing Address of Client

NOTE: Provide the client's mailing address. **Do not** provide the business mailing address of the attorney or accredited representative **unless** it serves as the safe mailing address on the application or petition being filed with this Form G-28.

13.a. Street Number and Name: PO Box 90487

13.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

13.c. City or Town: San Diego

13.d. State: CA **13.e.** ZIP Code: 92169

13.f. Province: N/A

13.g. Postal Code: N/A

13.h. Country

USA

Part 4. Client's Consent to Representation and Signature

Consent to Representation and Release of Information

I have requested the representation of and consented to being represented by the attorney or accredited representative named in **Part 1.** of this form. According to the Privacy Act of 1974 and U.S. Department of Homeland Security (DHS) policy, I also consent to the disclosure to the named attorney or accredited representative of any records pertaining to me that appear in any system of records of USCIS, ICE, or CBP.

Part 4. Client's Consent to Representation and Signature (continued)

Options Regarding Receipt of USCIS Notices and Documents

USCIS will send notices to both a represented party (the client) and his, her, or its attorney or accredited representative either through mail or electronic delivery. USCIS will send all secure identity documents and Travel Documents to the client's U.S. mailing address.

If you want to have notices and/or secure identity documents sent to your attorney or accredited representative of record rather than to you, please select **all applicable** items below. You may change these elections through written notice to USCIS.

1.a. ☒ I request that USCIS send original notices on an application or petition to the business address of my attorney or accredited representative as listed in this form.

1.b. ☒ I request that USCIS send any secure identity document (Permanent Resident Card, Employment Authorization Document, or Travel Document) that I receive to the U.S. business address of my attorney or accredited representative (or to a designated military or diplomatic address in a foreign country (if permitted)).

NOTE: If your notice contains Form I-94, Arrival-Departure Record, USCIS will send the notice to the U.S. business address of your attorney or accredited representative. If you would rather have your Form I-94 sent directly to you, select **Item Number 1.c.**

1.c. ☐ I request that USCIS send my notice containing Form I-94 to me at my U.S. mailing address.

Signature of Client or Authorized Signatory for an Entity

2.a. Signature of Client or Authorized Signatory for an Entity

➡ Gleidson Rodrigues da Silva

2.b. Date of Signature (mm/dd/yyyy) 09/21/2026

Part 5. Signature of Attorney or Accredited Representative

I have read and understand the regulations and conditions contained in 8 CFR 103.2 and 292 governing appearances and representation before DHS. I declare under penalty of perjury under the laws of the United States that the information I have provided on this form is true and correct.

1. a. Signature of Attorney or Accredited Representative

1.b. Date of Signature (mm/dd/yyyy) 09/21/2026

2.a. Signature of Law Student or Law Graduate

2.b. Date of Signature (mm/dd/yyyy)

Part 6. Additional Information

If you need extra space to provide any additional information within this form, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this form or attach a separate sheet of paper. Type or print your name at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a Family Name (Last Name): RODRIGUES DA SILVA

1.b. Given Name (First Name): Gleidson

1.c. Middle Name: N/A

2.a. Page Number **2.b.** Part Number **2.c.** Item Number

2.d. N/A

3.a. Page Number **3.b.** Part Number **3.c.** Item Number

3.d. N/A

4.a. Page Number **4.b.** Part Number **4.c.** Item Number

4.d. N/A

5.a. Page Number **5.b.** Part Number **5.c.** Item Number

5.d. N/A

6.a. Page Number **6.b.** Part Number **6.c.** Item Number

6.d. N/A

Supplemental Information for Spouse Beneficiary

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

USCIS
Form I-130A
OMB No. 1615-0012
Expires 02/28/2027

To be completed by an attorney or accredited representative (if any).			
☒ **Select this box if Form G-28 is attached.**	**Volag Number** (if any)	**Attorney State Bar Number** (if applicable)	**Attorney or Accredited Representative USCIS Online Account Number** (if any)
	N/A	343486	0074926254338

► **START HERE - Type or print in black ink.**

The purpose of this form is to collect additional information for a spouse beneficiary of Form I-130, Petition for Alien Relative. If your spouse is a U.S. citizen, lawful permanent resident, or non-citizen U.S. national who is filing Form I-130 on your behalf, you must complete and sign Form I-130A, Supplemental Information for Spouse Beneficiary, and submit it with the Form I-130 filed by your spouse. If you reside overseas, you still must complete Form I-130A, but you do not need to sign the form.

Part 1. Information About You (Spouse Beneficiary)

1. Alien Registration Number (A-Number) (if any)
► **A-** 203758084

2. USCIS Online Account Number (if any)
► N / A

Your Full Name

3.a. Family Name (Last Name): RODRIGUES DA SILVA

3.b. Given Name (First Name): Gleidson

3.c. Middle Name: N/A

Address History

Provide your physical addresses for the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in **Part 7. Additional Information**.

Physical Address 1

4.a. Street Number and Name: 670 Gellert Blv

4.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

4.c. City or Town: Daly City

4.d. State: CA **4.e.** ZIP Code: 94015

4.f. Province: N/A

4.g. Postal Code: N/A

4.h. Country: USA

5.a. Date From (mm/dd/yyyy): 10/28/2024

5.b. Date To (mm/dd/yyyy): PRESENT

Physical Address 2

6.a. Street Number and Name: 1025 Cadillac Way

6.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

6.c. City or Town: Burlingame

6.d. State: CA **6.e.** ZIP Code: 94010

6.f. Province: N/A

6.g. Postal Code: N/A

6.h. Country: USA

7.a. Date From (mm/dd/yyyy): 10/28/2023

7.b. Date To (mm/dd/yyyy): 10/27/2024

Last Physical Address Outside the United States

Provide your last address outside the United States of more than one year (even if listed above).

8.a. Street Number and Name: Rua Jaru 2438 Setor 04

8.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

8.c. City or Town: Rondonia

8.d. Province: N/A

8.e. Postal Code: 76880-00

8.f. Country: Brazil

Part 1. Information About You (The Spouse Beneficiary)

9.a. Date From (mm/dd/yyyy) 09/17/2001

9.b. Date To (mm/dd/yyyy) 06/05/2019

Information About Parent 1

Full Name of Parent 1

10.a. Family Name (Maiden Name) PEREIRA DA SILVA

10.b. Given Name (First Name) Adalto

10.c. Middle Name N/A

11. Date of Birth (mm/dd/yyyy) 05/07/1977

12. Sex ☒ Male ☐ Female

13. City/Town/Village of Birth
Rondonia

14. Country of Birth
Brazil

15. City/Town/Village of Residence
Unknown

16. Country of Residence
Unknwon

Information About Parent 2

Full Name of Parent 2

17.a. Family Name (Last Name) FONTES SILVA

17.b. Given Name (First Name) Marileide

17.c. Middle Name N/A

18. Date of Birth (mm/dd/yyyy) 07/04/1982

19. Sex ☐ Male ☒ Female

20. City/Town/Village of Birth
Rondonia

21. Country of Birth
Brazil

22. City/Town/Village of Residence
Rondonia

23. Country of Residence
Brazil

Part 2. Information About Your Employment

Provide your employment history for the last five years, whether inside or outside the United States. Provide your current employment first. If you are currently unemployed, type or print "Unemployed" in **Item Number 1.** below. If you need extra space to complete this section, use the space provided in **Part 7. Additional Information**.

Employment History

Employer 1

1. Name of Employer/Company
Self Employed

2.a. Street Number and Name N/A

2.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

2.c. City or Town N/A

2.d. State CA **2.e.** ZIP Code N/A

2.f. Province N/A

2.g. Postal Code N/A

2.h. Country
USA

3. Your Occupation
Wood Flooring Installer

4.a. Date From (mm/dd/yyyy) 08/23/2020

4.b. Date To (mm/dd/yyyy) PRESENT

Employer 2

5. Name of Employer/Company
N/A

6.a. Street Number and Name N/A

6.b. ☐ Apt. ☐ Ste. ☐ Flr. N/A

6.c. City or Town N/A

6.d. State **6.e.** ZIP Code N/A

6.f. Province N/A

6.g. Postal Code N/A

6.h. Country
N/A

Part 2. Information About Your Employment (continued)

7. Your Occupation: N/A

8.a. Date From (mm/dd/yyyy): N/A

8.b. Date To (mm/dd/yyyy): N/A

Part 3. Information About Your Employment Outside the United States

Provide your last occupation outside the United States if not shown above. If you never worked outside the United States, provide this information in the space provided in **Part 7. Additional Information.**

1. Name of Employer/Company: Buritis Vidros

2.a. Street Number and Name: Rua Cacaulândia 1144

2.b. ☐ Apt. ☐ Ste. ☐ Flr. Setor 2

2.c. City or Town: Buritis

2.d. State: N/A 2.e. ZIP Code: N/A

2.f. Province: N/A

2.g. Postal Code: 76880-000

2.h. Country: Brazil

3. Your Occupation: Glazier

4.a. Date From (mm/dd/yyyy): 05/01/2017

4.b. Date To (mm/dd/yyyy): 06/01/2019

Part 4. Spouse Beneficiary's Statement, Contact Information, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-130 and Form I-130A Instructions before completing this part.

Spouse Beneficiary's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

1.a. ☐ I can read and understand English, and I have read and understand every question and instruction on this form and my answer to every question.

1.b. ☒ The interpreter named in **Part 5.** read to me every question and instruction on this form and my answer to every question in Portuguese, a language in which I am fluent, and I understood everything.

2. ☒ At my request, the preparer name in **Part 6.**, Otavio Haverroth Silva, prepared this form for me based only upon information I provided or authorized.

Spouse Beneficiary's Contact Information

3. Spouse Beneficiary's Daytime Telephone Number: 650-740-5370

4. Spouse Beneficiary's Mobile Telephone Number (if any): 650-740-5370

5. Spouse Beneficiary's Email Address (if any): gleidsonantunes@icloud.com

Spouse Beneficiary's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit I seek.

I further authorize release of information contained in this form, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

I certify, under penalty of perjury, that I provided or authorized all of the information in this form, I understand all of the information contained in, and submitted with, my form, and that all of this information is complete, true, and correct.

Spouse Beneficiary's Signature

6.a. Spouse Beneficiary's Signature (sign in ink) ➡ Gleidson Rodrigues da Silva

6.b. Date of Signature (mm/dd/yyyy): 09/21/2026

NOTE TO ALL SPOUSE BENEFICIARIES: If you do not completely fill out this form or fail to submit required documents listed in the Instructions, USCIS may deny the Form I-130 filed on your behalf.

Part 5. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter you used to complete Form I-130A if he or she is different from the interpreter used to complete the Form I-130 filed on your behalf.

Interpreter's Full Name

1.a. Interpreter's Family Name (Last Name)
INACIO PENNA MELLO

1.b. Interpreter's Given Name (First Name)
Andre Vinicius

2. Interpreter's Business or Organization Name (if any)
HS Law Corp

Interpreter's Mailing Address

3.a. Street Number and Name: PO Box 90487

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town: San Diego

3.d. State: CA **3.e.** ZIP Code: 92169

3.f. Province

3.g. Postal Code

3.h. Country
USA

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number
4154252508

5. Interpreter's Mobile Telephone Number (if any)
4154252508

6. Interpreter's Email Address (if any)
andre@yousalaw.com

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and portuguese, which is the same language provided in **Part 4.**, **Item Number 1.b.**, and I have read to this spouse beneficiary in the identified language every question and instruction on this form and his or her answer to every question. The spouse beneficiary informed me that he or she understands every instruction, question, and answer on the form, including the **Spouse Beneficiary's Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature (sign in ink)

7.b. Date of Signature (mm/dd/yyyy) 09/21/2026

Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Form, if Other Than the Spouse Beneficiary

Provide the following information about the preparer you used to complete Form I-130A if he or she is different from the preparer used to complete the Form I-130 filed on your behalf.

Preparer's Full Name

1.a. Preparer's Family Name (Last Name)
HAVERROTH SILVA

1.b. Preparer's Given Name (First Name)
Otavio

2. Preparer's Business or Organization Name (if any)
HS Law Corp

Preparer's Mailing Address

3.a. Street Number and Name: PO Box 90487

3.b. ☐ Apt. ☐ Ste. ☐ Flr.

3.c. City or Town: San Diego

3.d. State: CA **3.e.** ZIP Code: 92169

3.f. Province

3.g. Postal Code

3.h. Country
USA

Part 6. Contact Information, Declaration, and Signature of the Person Preparing this Form, if Other Than the Spouse Beneficiary (continued)

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

5102419336

5. Preparer's Mobile Telephone Number (if any)

5102419336

6. Preparer's Email Address (if any)

otavio@legalhs.com

Preparer's Statement

7.a. ☐ I am not an attorney or accredited representative but have prepared this form on behalf of the spouse beneficiary and with the spouse beneficiary's consent.

7.b. ☒ I am an attorney or accredited representative and my representation of the spouse beneficiary in this case ☒ extends ☐ does not extend beyond the preparation of this form.

NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this form, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this form.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this form at the request of the spouse beneficiary. The spouse beneficiary then reviewed this completed form and informed me that he or she understands all of the information contained in, and submitted with, his or her form, including the **Spouse Beneficiary's Certification**, and that all of this information is complete, true, and correct. I completed this form based only on information that the spouse beneficiary provided to me or authorized me to obtain or use.

Preparer's Signature

8.a. Preparer's Signature (sign in ink)



8.b. Date of Signature (mm/dd/yyyy) 09/21/2026

Part 7. Additional Information

If you need extra space to provide any additional information within this form, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this form or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name): RODRIGUES DA SILVA

1.b. Given Name (First Name): Gleidson

1.c. Middle Name: N/A

2. A-Number (if any) ► A- 2 0 3 7 5 8 0 8 4

3.a. Page Number: 1 **3.b.** Part Number: 1 **3.c.** Item Number: 4.a

3.d.

Other Addresses:

3) 670 Gellert Blv, Daly City CA 94015

USA - Date from: 11/20/2022 - To: 10/27/2023

4)4339 Santa Rita Rd El sobrante, CA 94803

USA - Date from: 11/08/2021 - To: 11/19/2022

5)253 Pheasant Circle #6-253, Pittsburg, CA 94565

USA - Date from: 08/10/2020 - To: 11/07/2021

4.a. Page Number **4.b.** Part Number **4.c.** Item Number

4.d. N/A

5.a. Page Number **5.b.** Part Number **5.c.** Item Number

5.d. N/A

6.a. Page Number **6.b.** Part Number **6.c.** Item Number

6.d. N/A

7.a. Page Number **7.b.** Part Number **7.c.** Item Number

7.d. N/A

Exhibit list

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Exhibit 8 - Gleidson Rodrigues da Silva’s Notice to Appear

Gleidson Rodrigues da Silva’s Notice to Appear	174-175

Exhibit 1 - Sophia Lehnen Rodrigues Miranda's Identification Documents

Endorsements / Mentions Spéciales / Anotaciones

If your passport expires within six months of your date of departure, you may be denied entry into some countries.



Sophia Lehnen Rodrigues Miranda

SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

PASSPORT
PASSEPORT / PASAPORTE

THE UNITED STATES OF AMERICA

Type/Type/Tipo: P

Code/Code/Código: USA

Passport No./No. du Passeport/No. de Pasaporte: A28183301

USA

Surname/Nom/Apellidos
LEHNEN RODRIGUES MIRANDA

Given names/Prénoms/Nombres
SOPHIA

Nationality/Nationalité/Nacionalidad
UNITED STATES OF AME

Date of birth/Date de naissance/Fecha de nacimiento
20 DEC 1999

Sex/Sexe/Sexo
F

Place of birth/Lieu de naissance/Lugar de nacimiento
BRAZIL

Date of issue/Date de délivrance/Fecha de expedición
18 OCT 2023

Date of expiration/Date d'expiration/Fecha de caducidad
17 OCT 2033

Authority/Autorité/Autoridad
UNITED STATES DEPARTMENT OF STATE





P<USALEHNEN<RODRIGUES<MIRANDA<<SOPHIA<<<<<<<

A28183301OUSA9912201F3310171623099609<019998

THE UNITED STATES OF AMERICA

No. 44973861

CERTIFICATE OF NATURALIZATION

Personal description of holder as of date of naturalization:

Date of birth: **DECEMBER 20, 1999**

Sex: **FEMALE**

Height: **5** *feet* **11** *inches*

Marital status: **SINGLE**

Country of former nationality: **BRAZIL**



USCIS Registration No. **A206 043 656**

I certify that the description given is true, and that the photograph affixed hereto is a likeness of me.

Sophia Lehnen Rodrigues Miranda

(Complete and true signature of holder)

Be it known that, pursuant to an application filed with the Secretary of Homeland Security

at: **SAN FRANCISCO, CALIFORNIA**

The Secretary having found that:

SOPHIA LEHNEN RODRIGUES MIRANDA

residing at:

DALY CITY, CALIFORNIA

having complied in all respects with all of the applicable provisions of the naturalization laws of the United States, being entitled to be admitted as a citizen of the United States, and having taken the oath of allegiance at a ceremony conducted by

U.S. CITIZENSHIP AND IMMIGRATION SERVICES

at: **SAN FRANCISCO, CALIFORNIA** *on:* **SEPTEMBER 26, 2023**

such person is admitted as a citizen of the United States of America.

Ur M. Jaddou

U. S. Citizenship and Immigration Services

ALTERATION OR MISUSE OF THIS DOCUMENT IS A FEDERAL OFFENSE AND PUNISHABLE BY LAW

DEPARTMENT OF HOMELAND SECURITY

FORM N-550 (REV. 10/17)

Sophia Lehnen Rodrigues Miranda

Assinatura do titular / Signature du titulaire
Bearer's signature / Firma del titular

YD046914

Este passaporte deve ser assinado pelo titular, salvo em caso de incapacidade.

Ce passeport doit être signé par le titulaire, sauf en cas d'incapacité.

This passport must be signed, except where the bearer is unable to do so.

Este pasaporte debe ser firmado por el titular, salvo en caso de incapacidad.

PASSAPORTE
PASSPORT

REPUBLICA FEDERATIVA DO BRASIL

TIPO / TYPE: P
PAÍS EMISSOR / ISSUING COUNTRY: BRA
PASSAPORTE Nº / PASSPORT No.: YD046914

SOBRENOME / SURNAME
LEHNEN RODRIGUES MIRANDA

NOME / GIVEN NAMES
SOPHIA



NACIONALIDADE / NATIONALITY
BRASILEIRA

DATA DE NASCIMENTO / DATE OF BIRTH
20 DEZ/DEC 1999

IDENTIDADE Nº / PERSONAL No.

SEXO / SEX: F
NATURALIDADE / PLACE OF BIRTH: GOIÂNIA, GO, BRASIL

DATA DE EXPEDIÇÃO / DATE OF ISSUE
07 AGO/AUG 2019

AUTORIDADE / AUTHORITY
SÃO FRANCISCO CG

VÁLIDO ATÉ / DATE OF EXPIRY
06 AGO/AUG 2029

P<BRALEHNEN<RODRIGUES<MIRANDA<<SOPHIA<<<<<<<
YD046914<1BRA9912201F2908063<<<<<<<<<<<<<<06

Exhibit 2 - Gleidson Rodrigues da Silva’s Identification Documents

FEDERATIVE REPUBLIC OF BRAZIL
CIVIL REGISTRY OF NATURAL PERSONS

Judiciary Rondônia State
Electronic Inspection Seal
B9AAC11882-18E18
Check the validity at:
www.tjro.jus.br/consultaselo/

BIRTH CERTIFICATE

Name

GLEIDSON RODRIGUES DA SILVA

CPF: 055.956.922-00 **

REGISTRATION

096263 01 55 2002 1 00006 080 0001580 25

Date of birth in full	DAY	MONTH	YEAR
September sixteenth, two thousand one **	16	09	2001

Time of birth	City of origin
6:08 PM	MONTE NEGRO-RO **

City of registration and federation unit	Place, City of Birth and State	Sex
Buritis-RO **	IRMÃ DULCE MIXED UNIT, Avenida Francisco Prestes, no number, MONTE NEGRO – RO **	Male

Filiation
ADALTO PEREIRA DA SILVA and **MARILEIDE FONTES SILVA**, born in Ouro Preto D'Oeste, State of Rondônia, residing and domiciled at Santa Luzia D'Oeste Street, no number, Sector 04, in this city **

Grandparents
JOSÉ FRANCISCO PEREIRA DA SILVA, ESMERALDA PEREIRA DA SILVA, IRES PEREIRA DA SILVA AND MARIA DE JESUS FONTES SILVA **

Twin	Name and registration number of twin(s)
No	---------- **

Date of registration in full	DNV/Live birth registration number
September thirtieth, two thousand one **	10563297

ANNOTATIONS/NOTES TO BE ADDED
This certificate contains marginal annotations to the record. Fees: R$22.74, Fuju: R$4.55, Seal: R$1.44, Fundep: R$0.91, Fundimper: R$1.71, Fumorpge: R$0.68, Total: R$32.03.**2nd Copy**

Registration notes
No record. **

Office Name
Civil Registry Service of Natural Persons and Notary Public

Registrar
Guilherme José de Almeida

City/State
Municipality and Judicial District of Buritis – State of Rondônia

Address
Rua Theobroma, 1361, Sector 02
ZIP Code 76.880-000- Phone: (69)3238-2615
Email: civilenotas_buritis @ujro.jus.br

The content of this certificate is true. I certify.

Buritis-RO, June 21, 2024.

----//signature//----

Aislan Rodrigues de Souza
Deputy Registrar

04.693.557/0001-06
CIVIL REGISTRY OFFICE OF NATURAL PERSONS AND NOTARY PUBLIC
Rua Theobroma, 1381, Sector 02
ZIP Code: 76.880-000
BURITIS - RO

BA 026057032 BRP

ANOREG
Association of Notaries and Registrars of Brazil

ARPENBRASIL
NATIONAL ASSOCIATION OF NATURAL PERSONS REGISTRARS

I, Carolina Favero da Silva, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.



_____ Date: June 02, 2025.

REPÚBLICA FEDERATIVA DO BRASIL
REGISTRO CIVIL DAS PESSOAS NATURAIS

Poder Judiciário do Estado de Rondônia
Selo Digital de Fiscalização
B9AAC11882-18E18
Confira a validade em
www.tjro.jus.br/consultaselo/

CERTIDÃO DE NASCIMENTO

Nome

GLEIDSON RODRIGUES DA SILVA

CPF: 055.956.922-00 ••

Matrícula
096263 01 55 2002 1 00006 080 0001580 25

Data do nascimento por extenso
Dezesseis de setembro de dois mil e um ••

Dia	Mês	Ano
16	09	2001

Hora
18h 08min

Naturalidade
MONTE NEGRO-RO ••

Município de registro e unidade de federação
Buritis-RO ••

Local, Município de Nascimento e UF
UNIDADE MISTA IRMÃ DULCE, Avenida Francisco Prestes, s/nº, MONTE NEGRO-RO ••

Sexo
Masculino

Filiação
ADALTO PEREIRA DA SILVA e **MARILEIDE FONTES SILVA**, naturais de Ouro Preto D'Oeste-Estado de Rondônia, residentes e domiciliados na Rua Santa Luzia D'Oeste, s/nº, Setor 04, nesta cidade ••

Avós
JOSÉ FRANCISCO PEREIRA DA SILVA, ESMERALDA PEREIRA DA SILVA, IRES PEREIRA DA SILVA E MARIA DE JESUS FONTES SILVA ••

Gêmeo
Não

Nome e Matrícula do(s) gêmeo(s)
---------- ••

Data do registro por extenso
Trinta de setembro de dois mil e dois ••

Número da D.N.V
10563297

OBSERVAÇÃO/ANOTAÇÕES A ACRESCER
A presente certidão possui elementos de averbação à margem do termo. Emolumentos: R$22,74, Fuju: R$4,55, Selo: R$1,44, Fundep: R$0,91, Fundimper: R$1,71, Fumorpge: R$0,68, Total: R$32,03. **2ª Via**

Anotações de cadastro
Nada consta. ••

Nome do Ofício
Serviço de Registro Civil das Pessoas Naturais e Tabelionato de Notas

Oficial Registrador
Guilherme José de Almeida

Município e Comarca / UF
Município e Comarca de Buritis - Estado de Rondônia

Endereço
Rua Theobroma, 1361, Setor 02
CEP: 76.880-000 - Fone: (69)3238-2615
e-mail: civilenotas_buritis@tjro.jus.br

O conteúdo da certidão é verdadeiro. Dou fé.

Buritis-RO, 21 de junho de 2024.

Aislan Rodrigues de Souza
Oficial Substituto

04.693.557/0001-06
OFÍCIO DE REGISTRO CIVIL DAS PESSOAS NATURAIS E TABELIONATO DE NOTAS
Rua Theobroma, 1361, St. 02
CEP: 76.880-000
BURITIS - RO

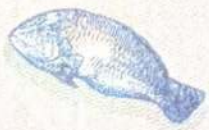
BA 026057032 BRP

ARPEN BRASIL







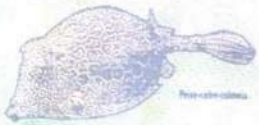


Este documento pertence à
Ce document appartient à la
This document is the property of the
Este documento pertenece a la

REPÚBLICA FEDERATIVA DO BRASIL

PASSAPORTE
PASSEPORT
PASSPORT
PASAPORTE









Gleidson Rodrigues.

Assinatura do titular / *Signature du titulaire* /
Bearer's signature / *Firma del titular*

YF048055

REPÚBLICA FEDERATIVA DO BRASIL

Este passaporte deve ser assinado pelo titular, salvo em caso de incapacidade.

Ce passeport doit être signé par le titulaire, sauf en cas d'incapacité.

This passport must be signed, except where the bearer is unable to do so.

Este pasaporte debe ser firmado por el titular, salvo en caso de incapacidad.



PASSAPORTE
PASSPORT

REPÚBLICA FEDERATIVA DO BRASIL

TIPO / *TYPE*
PP

PAÍS EMISSOR / *ISSUING COUNTRY*
BRA

PASSAPORTE Nº / *PASSPORT No.*
YF048055

SOBRENOME / *SURNAME*
RODRIGUES DA SILVA



NOME / *GIVEN NAMES*
GLEIDSON

NACIONALIDADE / *NATIONALITY*
BRASILEIRO(A)

DATA DE NASCIMENTO / *DATE OF BIRTH*
16 SET/SEP 2001

CPF / *PERSONAL NUMBER*
055956922-00

SEXO / *SEX*
M

NATURALIDADE / *PLACE OF BIRTH*
MONTE NEGRO/RO

FILIAÇÃO / *FILIATION*
MARILEIDE FONTES SILVA

ADALTO PEREIRA DA SILVA



DATA DE EXPEDIÇÃO / *DATE OF ISSUE*
01 MAI/MAY 2025

AUTORIDADE / *AUTHORITY*
SÃO FRANCISCO CG

VÁLIDO ATÉ / *DATE OF EXPIRY*
30 ABR/APR 2029

PPBRARODRIGUES<DA<SILVA<<GLEIDSON<<<<<<<<<<<
YF048055<5BRA0109165M2904308055956922OO<<<54

Este passaporte contém
32 páginas numeradas.

Ce passeport contient
32 pages numérotées.

This passport contains
32 numbered pages.

Este pasaporte contiene
32 páginas numeradas.



Roga-se às autoridades estrangeiras que prestem ao titular deste passaporte auxílio e assistência em caso de necessidade.

Les autorités des Etats étrangers sont priées de bien vouloir prêter au titulaire de ce passeport aide et assistance au besoin.

Foreign authorities are requested to afford the bearer such assistance and protection as may be necessary.

Se ruega a las autoridades extranjeras que presten al titular de este pasaporte auxilio y asistência en caso de necesidad.



Este passaporte é válido para todos os países com os quais o Brasil mantém relações diplomáticas.

Ce passeport est valable dans tous les pays avec lesquels le Brésil maintient des relations diplomatiques.

This passport is valid for all countries with which Brazil maintains diplomatic relations.

Este pasaporte es válido para todos los países con los que Brasil mantiene relaciones diplomáticas.

REPÚBLICA
FEDERATIVA
DO BRASIL

PAGOU
R$-Ouro 120.00
US$ 120.00
TEC 1.01.01.000.005
YF048055

01 MAI/MAY 2025
VERIDIANA DA SILVA VELAME
VICE-CÔNSUL

CONCEDIDO EM SUBSTITUIÇÃO A PASSAPORTE EXTRAVIADO.

CONSULADO-GERAL DO BRASIL EM SÃO FRANCISCO

BRA

200601MT

REPÚBLICA
FEDERATIVA
DO BRASIL

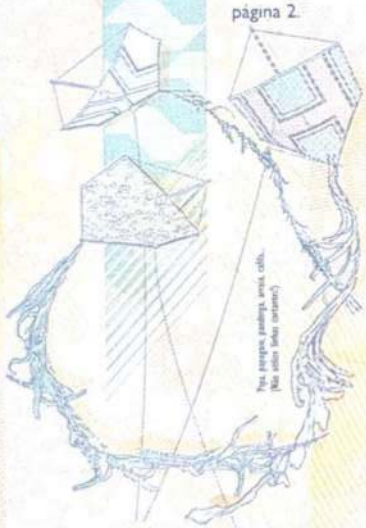
INFORMAÇÕES PARA O TITULAR

Este passaporte é propriedade da República Federativa do Brasil e qualquer tentativa de adulteração o tornará inválido.

O extravio – perda, roubo ou destruição – do passaporte constitui fato grave e deve ser comunicado imediatamente à autoridade policial e à Embaixada ou ao Consulado do Brasil, conforme o caso. Para isso, recomenda-se que o titular copie as informações da página 2.



Pica-pau-dourado



Para passagens, passeios, praia, clube. (Não utilize tarifas contratar).

Se o passaporte for entregue a pessoa ou serviço que não pertença ao Governo Brasileiro (por exemplo, para obtenção de visto, compra de passagem, etc.) e não for restituído, o titular deve considerá-lo como extraviado.

A concessão de novo passaporte em substituição ao extraviado depende de investigação.

Apenas o titular do passaporte poderá usá-lo. A utilização fraudulenta ou a cessão a outra pessoa constituem crimes, pela lei brasileira. Para ressalvar sua responsabilidade, o titular deve assinar seu passaporte, no local previsto na página 3, imediatamente após recebê-lo. Este passaporte só é válido com a assinatura do titular, salvo em caso de incapacidade.

REPÚBLICA FEDERATIVA DO BRASIL



Tucano

É recomendável que o brasileiro residente no exterior matricule-se na Embaixada ou Consulado do Brasil mais próximo de seu local de residência. Brasileiros de passagem por região conturbada devem entrar em contato com a Embaixada ou o Consulado do Brasil mais próximo para fornecer nome completo, endereço e número do passaporte. Impossibilitado de comparecer pessoalmente, poderá comunicar-se por outro meio, fornecendo nome completo, endereço e número do passaporte.

O brasileiro que viaje por áreas conturbadas deve ter presente que a assistência do Governo Brasileiro poderá ser limitada e dependerá das autoridades locais. A contratação de seguro de viagem poderá trazer tranquilidade ao viajante e seus familiares.

É responsabilidade do titular verificar, antes da viagem, a validade do passaporte e a necessidade de visto. O titular poderá solicitar a substituição do passaporte mesmo antes do vencimento, em vista que muitos países exigem prazo mínimo de validade.

O menor de idade, não emancipado, viajando desacompanhado de qualquer um dos pais, ou responsável legal, só poderá sair do Brasil munido de documentação pertinente prevista em lei.

O cidadão brasileiro que tenha outra nacionalidade deve ter em conta que a assistência consular brasileira no país de que também é nacional poderá ser consideravelmente limitada.



Museu de Arte de São Paulo - Masp

Consulte/ *Consultez / Consult / Consulte*
www.portalconsular.mre.gov.br ou **www.pf.gov.br**

REPÚBLICA FEDERATIVA DO BRASIL

8



Bromélia



Praça da Apoteose - Sambódromo - RJ

REPÚBLICA
FEDERATIVA
DO BRASIL

VISTOS / VISAS

9



Beija-flor

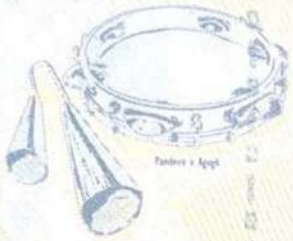


Profetas do Aleijadinho - Congonhas - MG

VISTOS / VISAS

REPÚBLICA
FEDERATIVA
DO BRASIL

10



Pandeiro e Agogô



Onça-pintada

REPÚBLICA
FEDERATIVA
DO BRASIL

VISTOS / VISAS

11



Capivara



Parque da Pedra da Cebola - Vitória - ES

VISTOS / VISAS

REPÚBLICA
FEDERATIVA
DO BRASIL



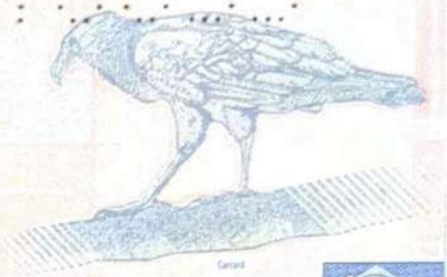
Mateo no Jaraguá -
Personagem do Rascunho



Mandacaru e seus Filhos

REPÚBLICA
FEDERATIVA
DO BRASIL

VISTOS / VISAS



Gavião



Mateo no Rio -
Personagem do Rascunho

VISTOS / VISAS

REPÚBLICA
FEDERATIVA
DO BRASIL



Ave-branca

14



Artesanato em argila - Festa Junina

REPÚBLICA FEDERATIVA DO BRASIL

VISTOS / VISAS



Sagui de tufos brancos

15



Artesanato em argila - Bumbum

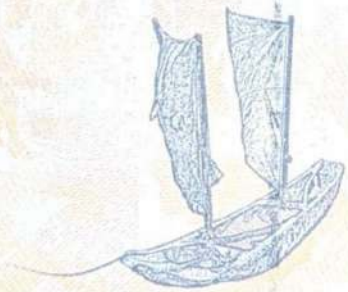
VISTOS / VISAS

REPÚBLICA FEDERATIVA DO BRASIL



Artesanato em Madeira - Santeiro de Ferro

16



Canoa utilizada no Maranhão

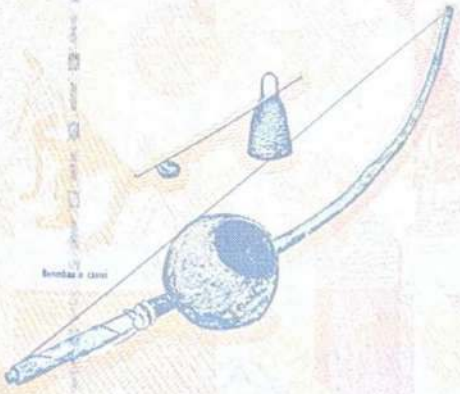
REPÚBLICA FEDERATIVA DO BRASIL

VISTOS / VISAS



Casario em Marechal Deodoro - AL

17



Berimbau e cesto

VISTOS / VISAS

REPÚBLICA FEDERATIVA DO BRASIL



Cerâmica de Icoaraci - PA

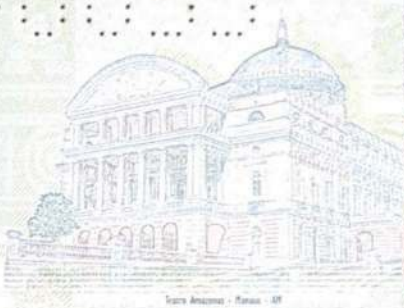
18



Sorvete do Pará

REPÚBLICA FEDERATIVA DO BRASIL

VISTOS / VISAS



Teatro Amazonas - Manaus - AM

19



Guaraná

VISTOS / VISAS

REPÚBLICA FEDERATIVA DO BRASIL

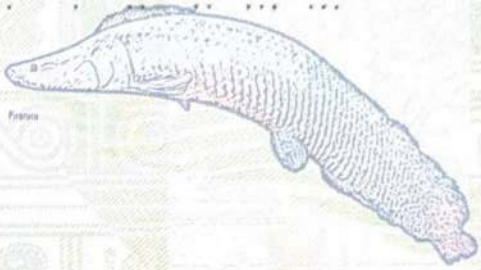


Espécime de RJ Amazônico



Palmeira e frutos de babaçu e carnaúba

REPÚBLICA FEDERATIVA DO BRASIL



Pirarara

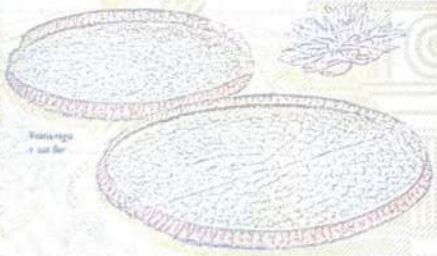


Boneca de artesanato indígena Karajá

REPÚBLICA FEDERATIVA DO BRASIL



Instrumentos tradicionais indígenas Arikapóvis



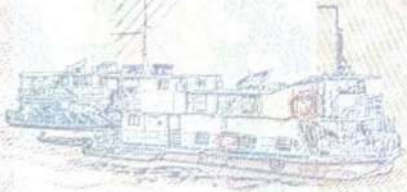
REPÚBLICA FEDERATIVA DO BRASIL





REPÚBLICA FEDERATIVA DO BRASIL





REPÚBLICA
FEDERATIVA
DO BRASIL

VISTOS / VISAS



VISTOS / VISAS



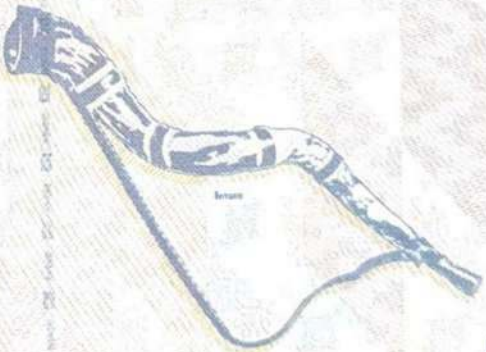
REPÚBLICA
FEDERATIVA
DO BRASIL





REPÚBLICA FEDERATIVA DO BRASIL





REPÚBLICA FEDERATIVA DO BRASIL



Pessanhas - artesanato de herança ucraniana



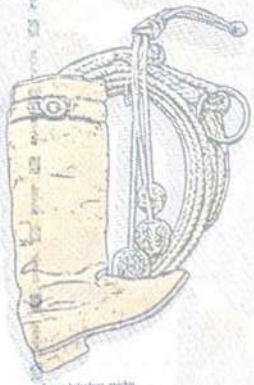
Bandeja de bidro - artesanato de herança japonesa

REPÚBLICA FEDERATIVA DO BRASIL

VISTOS / VISAS



Cuatipuerá



Bota e bolseadeira gaúchas

VISTOS / VISAS

REPÚBLICA FEDERATIVA DO BRASIL

ENDEREÇO

Os campos abaixo devem ser preenchidos pelo titular. Aconselha-se usar lápis preto para possibilitar a atualização dos dados.

ENDEREÇO DO TITULAR / ADRESSE DU TITULAIRE / BEARER'S ADDRESS / DIRECCIÓN DEL TITULAR

Endereço / Address

.....

Cidade / City

.....

Estado / State

.....

Pais / Country

.....

Telefone / Phone

.....



Pralta (fruto do pinheiro - araucária) e pinhão (semente da araucária - albumen)



Gralha-azul

REPÚBLICA FEDERATIVA DO BRASIL

ENDEREÇO

Em caso de acidente, avisar à Embaixada ou ao Consulado do Brasil mais próximo e à pessoa abaixo indicada:

En cas d'accident, conctacter l'Ambassade ou le Consulat du Brésil le plus proche ainsi que la personne indiquée ci-dessous:

In case of accident, notify the nearest Brazilian Embassy or Consulate and the individual named below:

En caso de accidente, contactar con la Embajada o el Consulado de Brasil más próximo y la persona indicada abajo:

Nome / *Name*

.....

Endereço / *Address*

.....

Cidade / *City*

.....

Estado / *State*

.....

Pais / *Country*

.....

Telefone / *Phone*

.....



Ema



Rainha arrebentada da palha de milho

REPÚBLICA FEDERATIVA DO BRASIL



Este passaporte contém um dispositivo eletrônico e elementos de segurança sensíveis.

Não dobre, perfure ou exponha este documento a temperaturas elevadas, umidade e luz excessivas, campos eletromagnéticos intensos ou substâncias químicas.

Cuia de chimarrão

Além do respeito e dos cuidados normais dispensados a um passaporte, tenha com este documento as mesmas precauções que teria com qualquer outro dispositivo eletrônico portátil, assegurando-se de que ele não ficará úmido, dobrado ou amassado.

Abusos podem afetar adversamente a operação do chip e reduzir sua utilidade para o titular e para o controle de fronteira.



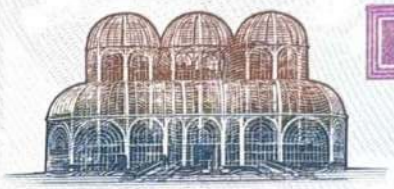
Tamanduá-bandeira

Créditos e informações importantes:
Acesse o endereço eletrônico ou utilize o QR Code abaixo.

https://www.casadamoeda.gov.br/passaporteBrasileiro

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REPÚBLICA FEDERATIVA DO BRASIL



BRA

Jardim Botânico de Curitiba - PR
Monumento a Anita Garibaldi em Laguna - SC
Ruínas de São Miguel das Missões - RS

NÃO GRAMPEAR OU CARIMBAR ESTA PÁGINA

NE PAS AGRAFER OU TAMPONNER CETTE PAGE

DO NOT STAPLE OR STAMP THIS PAGE

NO GRAPAR NI SELLAR ESTA PAGINA







Símbolo Internacional do Passaporte Eletrônico

CASA DA MOEDA DO BRASIL

FZ337213

Gleidson Silva Antunes

Assinatura do titular / Signature du titulaire
Bearer's signature / Firma del titular

Este passaporte deve ser assinado pelo titular,
salvo em caso de incapacidade.

Ce passeport doit être signé par le titulaire,
sauf en cas d'incapacité.

This passport must be signed,
except where the bearer is unable to do so.

Este pasaporte debe ser firmado por el titular,
salvo en caso de incapacidad.

REPÚBLICA FEDERATIVA DO BRASIL

PASSAPORTE
PASSPORT



TIPO / TYPE
P

PAÍS EMISSOR / ISSUING COUNTRY
BRA

PASSAPORTE Nº / PASSPORT No.
FZ337213

SOBRENOME / SURNAME
SILVA ANTUNES

NOME / GIVEN NAMES
GLEIDSON

NACIONALIDADE / NATIONALITY
BRASILEIRO(A)

DATA DO NASCIMENTO / DATE OF BIRTH
16 SET/SEP 2001

IDENTIDADE Nº / PERSONAL No.

SEXO / SEX
M

NATURALIDADE / PLACE OF BIRTH
ARINOS/MG

FILIAÇÃO / FILIATION
ARILSON ELIAS ANTUNES

MARILEIDE FONTES SILVA

O titular, enquanto menor, está autorizado pelos genitores, pelo prazo deste documento, a viajar apenas com um dos pais, indistintamente. Res. CNJ 131/11, Art. 13.

DATA DE EXPEDIÇÃO / DATE OF ISSUE
17 MAI/MAY 2019

AUTORIDADE / AUTHORITY
DPF/GMI/RO

VÁLIDO ATÉ / DATE OF EXPIRY
16 MAI/MAY 2024

P<BRASILVA<ANTUNES<<GLEIDSON<<<<<<<<<<<<<<<<<<<<
FZ337213<3BRA0109165M2405160<<<<<<<<<<<<<<<<<<00

Exhibit 3 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva’s Marriage Certificate

STATE OF CALIFORNIA
CERTIFICATION OF VITAL RECORD

COUNTY OF SAN MATEO
REDWOOD CITY, CALIFORNIA

LICENSE AND CERTIFICATE OF MARRIAGE

STATE FILE NUMBER | MUST BE LEGIBLE – MAKE NO ERASURES, WHITEOUTS, OR OTHER ALTERATIONS. USE DARK INK ONLY | LOCAL REGISTRATION NUMBER: 4-2026-41-000449

FIRST PERSON DATA (☐ Groom ■ Bride)

1A. FIRST NAME	1B. MIDDLE
SOPHIA	–

1C. CURRENT LAST	1D. LAST NAME AT BIRTH (IF DIFFERENT THAN 1C)
LEHNEN RODRIGUES MIRANDA	–

2. DATE OF BIRTH (MM/DD/CCYY)	3. STATE/COUNTRY OF BIRTH	4. #PREV. MARRIAGES/SRDP	5A. LAST MARRIAGE/SRDP ENDED BY:	5B. DATE ENDED (MM/DD/CCYY)
12/20/1999	BRAZIL	0	☐ DEATH ☐ DISSO ☐ ANNULMENT ☐ TERM SRDP ■ N/A	--/--/----

6. ADDRESS	7. CITY	8. STATE/COUNTRY	9. ZIP CODE
670 GELLERT BLVD	DALY CITY	CA	94015

10A. FULL BIRTH NAME OF FATHER/PARENT	10B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)
TERENCE RODRIGUES MIRANDA	BRAZIL

11A. FULL BIRTH NAME OF MOTHER/PARENT	11B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)
FRANCINE ZANCANARO LEHNEN	BRAZIL

SECOND PERSON DATA (■ Groom ☐ Bride)

12A. FIRST NAME	12B. MIDDLE
GLEIDSON	–

12C. CURRENT LAST	12D. LAST NAME AT BIRTH (IF DIFFERENT THAN 12C)
RODRIGUES DA SILVA	–

13. DATE OF BIRTH (MM/DD/CCYY)	14. STATE/COUNTRY OF BIRTH	15. # PREV. MARRIAGES/SRDP	16A. LAST MARRIAGE/SRDP ENDED BY:	16B. DATE ENDED (MM/DD/CCYY)
09/16/2001	BRAZIL	0	☐ DEATH ☐ DISSO ☐ ANNULMENT ☐ TERM SRDP ■ N/A	--/--/----

17. ADDRESS	18. CITY	19. STATE/COUNTRY	20. ZIP CODE
670 GELLERT BLVD	DALY CITY	CA	94015

21A. FULL BIRTH NAME OF FATHER/PARENT	21B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)
ADALTO PEREIRA DA SILVA	BRAZIL

22A. FULL BIRTH NAME OF MOTHER/PARENT	22B. STATE OF BIRTH (IF OUTSIDE U.S. ENTER COUNTRY)
MARILEIDE FONTES SILVA	BRAZIL

AFFIDAVIT

WE, THE UNDERSIGNED DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT WE ARE UNMARRIED AND THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF. WE FURTHER DECLARE THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR TO THE ISSUANCE OF A LICENSE IS KNOWN TO US. WE ACKNOWLEDGE RECEIPT OF THE INFORMATION REQUIRED BY FAMILY CODE SECTION 358 AND HEREBY APPLY FOR A LICENSE AND CERTIFICATE OF MARRIAGE.

23. SIGNATURE OF PERSON LISTED IN FIELDS 1A-1D	24. SIGNATURE OF PERSON LISTED IN FIELDS 12A-12D
▸ Sophia Lehnen Rodrigues Miranda	▸ Gleidson Rodrigues da Silva

LICENSE TO MARRY

I, THE UNDERSIGNED, DO HEREBY CERTIFY THAT THE ABOVE-NAMED PARTIES TO BE MARRIED HAVE PERSONALLY APPEARED BEFORE ME, OR THE PERSON PERFORMING THE CEREMONY HAS PERSONALLY APPEARED BEFORE ME AND PRESENTED AN AFFIDAVIT SIGNED BY THE PARTIES TO BE MARRIED DECLARING THAT ONE OR BOTH OF THE PARTIES ARE PHYSICALLY UNABLE TO APPEAR AND EXPLAINING THE REASONS THEREFOR IN ACCORDANCE WITH FAMILY CODE SECTION 426. THE PARTIES PROVED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSONS CLAIMED, HAVE DECLARED THAT THEY MEET ALL OF THE REQUIREMENTS OF THE LAW, AND HAVE PAID THE FEES PRESCRIBED BY LAW. AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF CALIFORNIA TO SOLEMNIZE THE MARRIAGE OF THE ABOVE-NAMED PERSONS. REQUIRED CONSENTS AND AFFIDAVITS FOR THE ISSUANCE OF THIS LICENSE ARE ON FILE.

25A. ISSUE DATE (MM/DD/CCYY)	25B. EXPIRES AFTER (MM/DD/CCYY)	25C. NAME OF COUNTY CLERK	25D. SIGNATURE OF CLERK AND DEPUTY CLERK
02/23/2026	05/23/2026	MARK CHURCH	BY ▸

25E. MARRIAGE LICENSE NUMBER	25F. COUNTY OF ISSUE	25G. RETURN COMPLETED MARRIAGE LICENSE TO (INCLUDE ADDRESS):
SM028726	SAN MATEO	555 COUNTY CENTER, REDWOOD CITY, CA 94063

WITNESS(ES) (ONE REQUIRED, NO MORE THAN TWO ALLOWED)

26A. SIGNATURE OF WITNESS	26B. NAME OF PERSON WITNESSING MARRIAGE (TYPE OR PRINT CLEARLY)
	Maricela Dujano

26C. ADDRESS, CITY, STATE/COUNTRY, AND ZIP CODE: 72 SOUTH ST #1 San Bruno, CA 94066

27A. SIGNATURE OF WITNESS	27B. NAME OF PERSON WITNESSING MARRIAGE (TYPE OR PRINT CLEARLY)

27C. ADDRESS, CITY, STATE/COUNTRY, AND ZIP CODE:

CERTIFICATION OF PERSON SOLEMNIZING MARRIAGE

I, THE UNDERSIGNED, DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ABOVE-NAMED PARTIES WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF CALIFORNIA. NOTE: THE MARRIAGE CEREMONY MUST TAKE PLACE IN THE STATE OF CALIFORNIA.

28A. DATE OF MARRIAGE (MM/DD/CCYY)	28B. CITY/TOWN OF MARRIAGE	28C. COUNTY OF MARRIAGE
03/21/2026	SAN MATEO	SAN MATEO COUNTY

29A. SIGNATURE OF PERSON SOLEMNIZING MARRIAGE	29B. RELIGIOUS DENOMINATION (IF CLERGY)
▸ Jennirose N. Rivera	NON-DENOMINATIONAL

29C. NAME OF PERSON SOLEMNIZING MARRIAGE (TYPE OR PRINT CLEARLY)	29D. OFFICIAL TITLE
JENNIROSE N. RIVERA	MINISTER

29E. ADDRESS, CITY, STATE/COUNTRY, AND ZIP CODE: 43 MORTON DRIVE, DALY CITY CA 94015

NEW NAMES (IF ANY)

NEW MIDDLE AND LAST NAME OF PERSON LISTED IN 1A-1D (IF ANY) FOR USE UPON SOLEMNIZATION OF THE MARRIAGE (SEE REVERSE FOR INFORMATION)

30A. FIRST – MUST BE SAME AS 1A	30B. MIDDLE	30C. LAST
–	–	–

NEW MIDDLE AND LAST NAME OF PERSON LISTED IN 12A-12D (IF ANY) FOR USE UPON SOLEMNIZATION OF THE MARRIAGE (SEE REVERSE FOR INFORMATION)

31A. FIRST – MUST BE SAME AS 12A	31B. MIDDLE	31C. LAST
–	–	–

LOCAL REGISTRAR

32A. NAME OF LOCAL REGISTRAR	32B. SIGNATURE OF CLERK & DEPUTY CLERK	32C. DATE ACCEPTED FOR REGISTRATION
MARK CHURCH	BY ▸	MAR 30 2026

STATE OF CALIFORNIA, DEPARTMENT OF PUBLIC HEALTH, OFFICE OF VITAL RECORDS — VS-117 (01/01/2010)

000892670

CERTIFIED COPY OF VITAL RECORDS
COUNTY OF SAN MATEO, STATE OF CALIFORNIA

Page 1 of 1

MARK CHURCH
Assessor-County Clerk-Recorder

This is a true and exact reproduction of the document officially registered and placed on file in the office of the San Mateo County Assessor-County Clerk-Recorder.

By KAMILLE SANTOS, Deputy — DATE ISSUED 03/30/2026

CASANMAT02

This copy not valid unless prepared on engraved border displaying date, seal and signature of Recorder.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Exhibit 4 - Birth Certificate of Arthur Lehnen Rodrigues (Son of Petitioner and Beneficiary)

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF SAN MATEO

HEALTH SYSTEM

SAN MATEO, CALIFORNIA

1202441002772

CERTIFICATE OF LIVE BIRTH

STATE OF CALIFORNIA

USE BLACK INK ONLY

STATE FILE NUMBER

LOCAL REGISTRATION NUMBER

THIS CHILD

1A. NAME OF CHILD - FIRST	1B. MIDDLE	1C. LAST
ARTHUR	-	LEHNEN RODRIGUES

2. SEX	3A. THIS BIRTH, SINGLE, TWIN, ETC.	3B. IF MULTIPLE, THIS CHILD 1ST, 2ND, ETC.	4A. DATE OF BIRTH - MM/DD/CCYY	4B. HOUR - 24 HOUR CLOCK TIME
MALE	SINGLE	-	08/08/2024	2138

PLACE OF BIRTH

5A. PLACE OF BIRTH - NAME OF HOSPITAL OR FACILITY	5B. STREET ADDRESS - STREET AND NUMBER, OR LOCATION
KAISER FOUNDATION	1100 VETERANS BOULEVARD
5C. CITY	**5D. COUNTY**
REDWOOD CITY	SAN MATEO

NAME OF PARENT

6A. NAME OF PARENT - FIRST	6B. MIDDLE	6C. LAST - BIRTH NAME	6D.	7. BIRTHPLACE - STATE/ COUNTRY	8. DATE OF BIRTH
GLEIDSON	-	RODRIGUES DA SILVA	☐ MOTHER ☒ FATHER ☐ PARENT	BRAZIL	09/16/2001

NAME OF PARENT

9A. NAME OF PARENT - FIRST	9B. MIDDLE	9C. LAST - BIRTH NAME	9D.	10. BIRTHPLACE - STATE/ COUNTRY	11. DATE OF BIRTH
SOPHIA	-	LEHNEN RODRIGUES MIRANDA	☒ MOTHER ☐ FATHER ☐ PARENT	BRAZIL	12/20/1999

INFORMANT AND BIRTH CERTIFICATION

I CERTIFY THAT I HAVE REVIEWED THE STATED INFORMATION AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.	12A. PARENT OR OTHER INFORMANT - SIGNATURE	12B. RELATIONSHIP TO CHILD	12C. DATE SIGNED
	CATHY SCANLON	BIRTH CLERK	08/10/2024
I CERTIFY THAT THE CHILD WAS BORN ALIVE AT THE DATE, HOUR, AND PLACE STATED.	13A. ATTENDANT/CERTIFIER - SIGNATURE AND DEGREE OR TITLE	13B. LICENSE NUMBER	13C. DATE SIGNED
	KAVITA SEGARAN, CLERK	G79287	08/14/2024

13D. TYPED NAME, TITLE AND MAILING ADDRESS OF ATTENDANT	14. TYPED NAME AND TITLE OF CERTIFIER IF OTHER THAN ATTENDANT
ERICA VERNICE BRENEMAN, MD 1100 VETERANS BOULEVARD, REDWOOD CITY, CA 94063	KAVITA SEGARAN, CLERK

LOCAL REGISTRAR

15A. DATE OF DEATH - MM/DD/CCYY	15B. STATE FILE NO. - STATE USE ONLY	16. LOCAL REGISTRAR - SIGNATURE	17. DATE ACCEPTED FOR REGISTRATION - MM/DD/CCYY
		KISMET BALDWIN-SANTANA, MD	08/14/2024

CERTIFIED COPY OF VITAL RECORD

STATE OF CALIFORNIA, COUNTY OF SAN MATEO

001253904

This is a true and exact reproduction of the document officially registered and placed on file in the office of the SAN MATEO COUNTY HEALTH SYSTEM.

DATE ISSUED 08/27/2024 MUNIRE DEMIRCI K Baldwin-Santana MD

HEALTH OFFICER AND REGISTRAR

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the County Health Officer.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Exhibit 5 - Evidence of Bona Fide Marriage

PERSONAL STATEMENT REGARDING MY RELATIONSHIP WITH MY HUSBAND, GLEIDSON RODRIGUES DA SILVA

I, Sophia Lehnen Rodrigues Miranda, born on December 20, 1999, in Goiânia, Brazil, provide this statement to attest to the truthfulness, continuity, and authenticity of my relationship with my husband, Gleidson Rodrigues da Silva.

Our story began when we met at a party, and over time, we grew closer and closer. Our relationship developed naturally, gradually building a very strong and genuine bond. On August 24, 2021, Gleidson asked me to be his girlfriend at a soccer field. It was a simple moment without any extravagance, but it was deeply special and unforgettable for both of us, marking the beginning of an inseparable partnership. As our relationship matured, we decided to take the next step and live together, and I invited him to move into my parents' home so that we could begin our life together as a couple.

In September 2023, we took an important step toward becoming independent by renting our first place of our own, where we began building our family. Shortly afterward, in November 2023, I found out that I was pregnant, which was one of the happiest moments of our lives. Our son, Arthur, was born in August 2024, bringing even more love, strength, and unity to our family. After Arthur was born, we decided to temporarily return to my parents' home because, at that time, Gleidson was the only one working, and we believed this was the best decision to ensure our financial stability and have family support during our son's first few months.

On June 17, 2025, Gleidson surprised me by proposing, marking another unforgettable milestone in our journey together. We decided to make our union official and chose March 21, 2026, as the date to celebrate our wedding. Our relationship is built every day on love, respect, partnership, and companionship. We share responsibilities and work toward our goals together as a couple and as parents.

I declare, under penalty of perjury, that all of the information provided above is true and accurately reflects the reality of our relationship and family life.

Sophia Lehnen Rodrigues Miranda

Sophia Lehnen Rodrigues Miranda 09/22/2026

PERSONAL RELATIONSHIP STATEMENT

I, Gleidson Rodrigues da Silva, born on September 16, 2001, in the city of Monte Negro, State of Rondônia, Brazil, provide this statement for the purpose of attesting to the truthfulness, continuity, and authenticity of my relationship with my wife, Sophia.

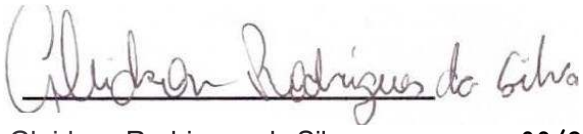
Our story began in 2020, when we met and exchanged our first messages. Our first in-person meeting took place at a party held in a warehouse workshop, a moment when we felt a strong, immediate connection. Although we went through an initial on-and-off phase, during which I was still getting used to the idea of making a serious commitment, our connection definitively solidified in August 2021. Realizing that we were deeply in love, we made our relationship official on August 24, 2021..

From that moment on, we established a routine based on companionship and mutual dedication. At the time, while she was living with her parents in Daly City, California, I was living in Pittsburg and, later, in Richmond, in the same state. Every weekend, I would travel to her parents' house to spend that time together, returning only on Monday. As our relationship grew stronger, and considering that my work in construction made commuting easier, while Sophia's job as a dental assistant required her to be at a fixed location, I accepted the invitation to move permanently to her family's home in Daly City.

As time passed, and with the desire to build our financial and residential independence, we decided in 2023 to look for our own space and moved into our first rented apartment. In November 2023, we received the happy news that Sophia was pregnant. We planned the arrival of our baby together, and our son, Arthur, was born on August 8, 2024. With the birth of Arthur and facing the costs of maintaining a household independently at the time, we decided, after our apartment lease ended, to return to my in-laws' house, who welcomed us with immense support and affection to help us care for our son, where we reside to this date.

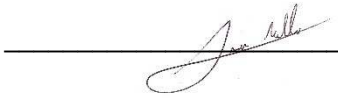
I always maintained the desire to fulfill Sophia's dream of getting married. Thus, on June 17, 2025, I prepared a surprise in our bedroom and proposed to her, at which moment she said "yes". We formalized our civil marriage on March 21, 2026, officially consolidating more than five years of life together, cohabitation, shared financial and family responsibilities, and the joint upbringing of our son.

I declare, under penalty of perjury, that all the information provided above is strictly true and reflects the reality of our marital and family life.



Gleidson Rodrigues da Silva 09/22/2026

I, André Vinícius Inacio Penna Mello, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.



Date: September 22, 2026.

DECLARAÇÃO PESSOAL DE RELACIONAMENTO

Eu, Gleidson Rodrigues da Silva, nascido em 16 de setembro de 2001 na cidade de Monte Negro, Estado de Rondônia, Brasil, presto esta declaração com o objetivo de atestar a veracidade, a continuidade e a autenticidade do meu relacionamento com minha esposa, Sophia.

A nossa história começou no ano de 2020, quando nos conhecemos e trocamos nossas primeiras mensagens. Nosso primeiro encontro presencial ocorreu em uma festa realizada em um galpão de oficina, momento em que sentimos uma forte conexão imediata. Embora tenhamos vivido uma fase inicial com idas e vindas, na qual eu ainda amadurecia a ideia de assumir um compromisso sério, nossa aproximação se consolidou de forma definitiva em agosto de 2021. Percebendo que estávamos profundamente apaixonados, oficializamos nosso namoro no dia 24 de agosto de 2021.

A partir desse momento, estabelecemos uma rotina pautada pelo companheirismo e dedicação mútua. Na época, enquanto ela morava com os pais em Daly City, Califórnia, eu residia em Pittsburg e, posteriormente, em Richmond, no mesmo estado. Todos os finais de semana, eu me deslocava para a casa dos pais dela para passarmos esse tempo juntos, retornando apenas na segunda-feira. Com o fortalecimento da relação e considerando que meu trabalho na construção civil facilitava o deslocamento, ao passo que o trabalho de Sophia como assistente de dentista exigia presença fixa, aceitei o convite para me mudar definitivamente para a residência da família dela em Daly City.

Com o passar do tempo e o desejo de construirmos nossa independência financeira e residencial, decidimos em 2023 procurar nosso próprio espaço e nos mudamos para nosso primeiro apartamento alugado. Em novembro de 2023, recebemos a feliz notícia de que a Sophia estava grávida. Planejamos juntos a chegada do nosso bebê, e nosso filho, Arthur, nasceu em 08 de agosto de 2024. Com o nascimento de Arthur e diante dos custos para manter a casa de forma autônoma na época, decidimos, após o término do contrato do apartamento, retornar para a casa dos meus sogros, que nos acolheram com imenso apoio e carinho para nos ajudar nos cuidados com o nosso filho, onde residimos até a presente data.

Sempre mantive o desejo de realizar o sonho da Sophia de se casar. Assim, em 17 de junho de 2025, preparei uma surpresa em nosso quarto e a pedi em casamento, momento em que ela disse "sim". Concretizamos nosso matrimônio no civil no dia 21 de março de 2026, consolidando oficialmente mais de cinco anos de vida em comum, coabitação, responsabilidades financeiras e familiares compartilhadas e a criação conjunta do nosso filho.

Declaro, sob pena de perjúrio, que todas as informações acima relatadas são estritamente verdadeiras e refletem a realidade de nossa vida conjugal e familiar.

Gleidson Rodrigues da Silva

Gleidson Rodrigues da Silva 09/22/2026

Wells Fargo Clear Access Banking[SM]

SOPHIA MIRANDA
GLEIDSON RODRIGUES DA SILVA
670 GELLERT BLVD
DALY CITY CA 94015-2759

Questions?

Available by phone 24 hours a day, 7 days a week:
We accept all relay calls, including 711
1-800-TO-WELLS (1-800-869-3557)

En español: 1-877-727-2932

Online: wellsfargo.com

Write: Wells Fargo Bank, N.A. (114)
P.O. Box 6995
Portland, OR 97228-6995

You and Wells Fargo

Thank you for being a loyal Wells Fargo customer. We value your trust in our company and look forward to continuing to serve you with your financial needs.

Other Wells Fargo Benefits

Strengthen Your Security Before Peak Shopping Season

Fraud increases in the fall and during the busy holiday shopping season. Help protect your account by taking advantage of the security tools already available to you:

1) Add your card to a digital wallet(1)
- Pay conveniently and securely both in-store and online.
- Your card number remains private, helping to protect your account and information.
2) Know how to turn your credit or debit card on or off(2)
- Misplaced your card? No problem.
- Turning your card off can help stop unauthorized use until you find it again.
3) Enable two-factor authentication
- Add a second layer of account protection.
- Help detect and prevent unauthorized access to your accounts if your password is stolen.

The best part? It takes less than 10 minutes to set up. Just sign-on to the Wells Fargo Mobile®app(3) now to add these features.

1. Digital wallets may not be available on all devices.
2. Turning off your card is not a replacement for reporting your card lost or stolen. Contact us immediately if you believe that unauthorized transactions have been made. Turning your card off will not stop card transactions presented as recurring transactions or the posting of refunds, reversals, or credit adjustments to your account. Any digital card numbers linked to the card will also be turned off. For debit cards, turning off your card will not stop transactions using other cards linked to your deposit account. For credit cards, turning off your card will turn off all cards associated with your credit card account.
3. Availability may be affected by your mobile carrier's coverage area. Your mobile carrier's message and data rates may apply.

Statement period activity summary

Beginning balance on 8/12	$0.00
Deposits/Additions	25.00
Withdrawals/Subtractions	- 14.06
Ending balance on 9/8	$10.94

Account number: 6168859871 (primary account)
SOPHIA MIRANDA
GLEIDSON RODRIGUES DA SILVA
California account terms and conditions apply
For Direct Deposit use
Routing Number (RTN): 121042882

Transaction history

Date	*Check Number*	*Description*	*Deposits/ Additions*	*Withdrawals/ Subtractions*	*Ending daily balance*
8/12		Online Transfer From Miranda S Everyday Checking xxxxxx6402 Ref #Ib0Zbyjnnd on 08/12/26	25.00		25.00
8/27		Purchase authorized on 08/25 Safeway #3116 South San Fra CA S306238106111425 Card 7098		6.99	
8/27		Purchase authorized on 08/27 7-Eleven Daly City CA P306239522477309 Card 7098		4.22	13.79
8/28		Purchase authorized on 08/27 Chevron 0375600 Danville CA S306239713311365 Card 7098		2.63	
8/28		Purchase authorized on 08/28 7-Eleven Daly City CA P586240531652458 Card 7098		0.22	10.94
Totals			$25.00	$14.06	

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

Monthly service fee summary

For complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period: 08/12/2026 - 08/12/2026	Standard monthly service fee $5.00	You paid $0.00

The fee is waived for this period because you met the following waiver: The bank has waived the fee for this period

Your monthly service fee can be avoided with any one of the following each fee period:

- Primary account owner is 13-24 years old
- A qualifying monthly non-civilian military direct deposit with the Wells Fargo Worldwide Military Banking Program
- Qualifying electronic deposits totaling $250.00 or more

TIP Report check fraud right away. Fraudsters target the mail looking for checks they can alter and use. They may keep the amount the same, so it's important to review the check image as soon as it clears. Contact us to request check images or view them online. If you mail checks, make sure the person you sent it to receives it.

IMPORTANT ACCOUNT INFORMATION

Other Wells Fargo Benefits

Help take control of your finances with a Wells Fargo personal loan.
Whether it's managing debt, making a large purchase, improving your home, or paying for unexpected expenses, a personal loan may be able to help. See personalized rates and payments in minutes with no impact to your credit score.
Get started at wellsfargo.com/personalloan.

Other Wells Fargo Benefits

Wells Fargo is serious about security.
Keeping your accounts and information secure is our priority. We use sophisticated tools to help safeguard your money - 24/7 fraud monitoring, data encryption, secure technology, and protection against suspicious activity. Visit our Security Center at wellsfargo.com/security to learn more.

Important Information You Should Know

- To dispute or report inaccuracies in information we have furnished to a Consumer Reporting Agency about your accounts

  Wells Fargo Bank, N.A. may furnish information about deposit accounts to Early Warning Services. You have the right to dispute the accuracy of information that we have furnished to a consumer reporting agency by writing to us at Wells Fargo Bank N.A. Attn: Deposit Furnishing Disputes MAC F2304-019 PO Box 50947 Des Moines, IA 50340. Include with the dispute the following information as available: Full name (First, Middle, Last), Complete address, The account number or other information to identify the account being disputed, Last four digits of your social security number, Date of Birth. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.

- If your account has a negative balance:

  Please note that an account overdraft that is not resolved 60 days from the date the account first became overdrawn will result in closure and charge off of your account. In this event, it is important that you make arrangements to redirect recurring deposits and payments to another account. The closure will be reported to Early Warning Services. We reserve the right to close and/or charge-off your account at an earlier date, as permitted by law. The laws of some states require us to inform you that this communication is an attempt to collect a debt and that any information obtained will be used for that purpose.

- In case of errors or questions about your electronic transfers:

  Telephone us at the number printed on the front of this statement or write us at Wells Fargo Bank, P.O. Box 6995, Portland, OR 97228-6995 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

  1. Tell us your name and account number (if any).
  2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
  3. Tell us the dollar amount of the suspected error.

  We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

- In case of errors or questions about other transactions (that are not electronic transfers):

  Promptly review your account statement within 30 days after we made it available to you, and notify us of any errors.

Account Balance Calculation Worksheet

1. Use the following worksheet to calculate your overall account balance.
2. Go through your register and mark each check, withdrawal, ATM transaction, payment, deposit or other credit listed on your statement. Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn from your account during this statement period.
3. Use the chart to the right to list any deposits, transfers to your account, outstanding checks, ATM withdrawals, ATM payments or any other withdrawals (including any from previous months) which are listed in your register but not shown on your statement.

ENTER

A. The ending balance shown on your statement.. . . . . $_____

ADD

B. Any deposits listed in your $_____
register or transfers into $_____
your account which are not $_____
shown on your statement. + $_____
. . . . . TOTAL $_____

CALCULATE THE SUBTOTAL

(Add Parts A and B)
. . . . . TOTAL $_____

SUBTRACT

C. The total outstanding checks and withdrawals from the chart above. . . . . - $_____

CALCULATE THE ENDING BALANCE

(Part A + Part B - Part C)
This amount should be the same as the current balance shown in your check register. . . . . $_____

Number	Items outstanding	Amount
	Total $	

To download and print additional Account Balance Calculation Worksheets (PDF), enter www.wellsfargo.com/balancemyaccount in your browser on either your computer or mobile device.

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DocuSign Envelope ID: 21170D0C-C515-45BC-BF0F-5124A01393FE

RESIDENTIAL LEASE – TERM SHEET

Equity Residential

Lessor: **Equity Residential Management, L.L.C., as agent for the Owner**

Community: Northpark

Premises: 004-202

Address: 1080 Carolan Avenue
Burlingame, CA, 94010
(650) 342-2301

Premises Address: 1025 Cadillac Way #202
Burlingame, CA, 94010

Residents: Sophia Lehnen Rodrigues Miranda
Gleidson Silva Antunes

Guarantor:

Occupants:

LEASE TERM
Commencement Date: 10/28/2023 **Expiration Date:** 10/27/2024 **Renters' Liability Insurance Required:** Yes

Lease Term Expiration: You must provide us with a written notice of your intent to vacate at least 30 days prior to your move-out date. If you fail to give the required notice, and you move-out anyway, the Lease term will be automatically extended for an additional month after you vacate the Premises and you will be obligated to pay insufficient notice rent to fulfill your notice obligation at the rental rate that is in effect on your move-out date.

Total Deposits Required: $1000.00

Total Monthly Charges : $2769.00
(includes all monthly recurring charges listed below)

Charge Description	Amount	Charge Description	Amount	Charge Description	Amount
Monthly Apartment Rent	2619.00				
Pet - Cat	150.00				

Assigned Item Description

Concessions: Monthly Recurring Concession: $0.00 /per month. Total Amount of One-Time/ Non-Recurring Concession: $0.00 . Total Amount of Other Recurring Concessions: $0.00 . The Total Monthly Rent shown above will be adjusted by these lease concession amounts. If this Lease is terminated early, you may be required to pay us a portion of your concession as set forth in the Lease Concession paragraph of the Terms and Conditions.

Total Other Fees and Charges: $0.00
(includes all charges listed below)

Charge Description	Amount	Charge Description	Amount	Charge Description	Amount

	Type	Breed	Weight	License/Tag
Approved Pets	Cat	Domestic Short Hair	0	
	Cat	Domestic Short Hair	0	

For additional information regarding our pet policy, please refer to the Resident Handbook and Community Policies.

Resident Account Number: 29251-004-202-5

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LESSOR PAYS UNCHECKED UTILITIES / RESIDENT PAYS CHECKED UTILITIES

☑ Electricity:	Direct billed by the provider. You pay the provider
☐ Gas/Heating Oil:	
☑ Water:	Allocated based on square footage & number of occupants. You will receive a bill from our billing vend
☑ Sewer:	Allocated equally among all occupied apartments. You will receive a bill from our billing vendor.
☑ Central Boiler:	Allocated equally among all occupied apartments. You will receive a bill from our billing vendor.
☑ Cable:	Direct billed by the provider. You pay the provider
☑ Garbage Removal:	Allocated equally among all occupied apartments. You will receive a bill from our billing vendor.
☑ Internet:	Direct billed by the provider. You pay the provider
☑ Pest:	Allocated equally among all occupied apartments. You will receive a bill from our billing vendor.

Late Fees: Your rent is due on the 1st of each month. If we do not receive your rent and other recurring charges, in person before the close of business, or electronically by 11:59 pm local time, on day 4 , you will be charged a late fee as follows:

5% on the 5th - minimum of $50

Returned Item Fees: If your payment fails to clear the bank for any reason, you will be charged a returned item fee of $ 25.00 per item.

Additional Lease Addenda	
Residential Lease - Terms and Conditions	Proposition 65 Warning Addendum
Utilities Addendum	
Asbestos Addendum	
Construction and Rehab Addendum	
Smoke-Free Lease Addendum	
Info on Mold & Moisture for Renters in CA Addendum	
Fall Prevention Addendum	
California Statewide Rent Regulation Addendum	
Pet Animal Agreement	
SmartHome Addendum	

By signing this Term Sheet, you acknowledge that each of the Additional Lease Addenda are attached to this term Sheet and are therefore made a part of the Lease. You further acknowledge that you have read and that you agree to all of the provisions set forth in this Term Sheet and the Additional Lease Addenda.

You also acknowledge that you have received, or will receive, (separate from this Lease) a copy of the Resident Handbook and Community Policies and a copy of the Condition of Premises Inspection Form. You acknowledge and agree that the provisions contained in these two documents are incorporated into this Lease and that you will abide by the policies and procedures set forth in these documents.

You specifically acknowledge that this Lease contains provisions extending the Lease Term if you stay beyond the Expiration Date set forth on the first page of this Term Sheet or if you fail to provide timely written notice of your intent to vacate the Premises at least 30 days prior to the Expiration Date.

READ THIS TERM SHEET BEFORE SIGNING

Residents (ALL Residents must sign and date):

DocuSigned by:
Sophia Lehmen Rodrigues Miranda 10/26/2023 Date
A18BA2DEE827408...
Sophia Lehmen Rodrigues Miranda

DocuSigned by:
Gleidson Silva Antunes 10/26/2023 Date
7B185A221D2C478...
Gleidson Silva Antunes

_____ Date _____ Date _____ Date

_____ Date _____ Date _____ Date

Lessor: **Equity Residential Management, L.L.C., as agent for the Owner**

By: _____ 10/26/2023
It's: Authorized Representative Date

Resident Account Number: 29251-004-202-5

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California USA DRIVER LICENSE



DL Y5621894 CLASS C

EXP 12/20/2028 END NONE

LN LEHNEN RODRIGUES MIRANDA

FN SOPHIA

670 GELLERT BLVD
DALY CITY, CA 94015

DOB 12/20/1999

RSTR NONE

12201999

DONOR

SEX F HAIR BRN EYES BRN

HGT 5'-11" WGT 195 lb

DD 10/31/2019593RB/AAFD/28 ISS 10/24/2023

CLASS: C - Veh w/GVWR ≤26000, No M/C
ENDORSEMENTS: None
RESTRICTIONS: None

This license is issued as a license to drive a motor vehicle; it does not establish eligibility for employment, voter registration, or public benefits.

122099

Rev 08/29/2017

23297Y56218940401

California USA DRIVER LICENSE

FEDERAL LIMITS APPLY



DL Y6765452

CLASS C

EXP 09/16/2029

END NONE

LN SILVA ANTUNES

FN GLEIDSON

670 GELLERT BLVD

DALY CITY, CA 94015

DOB 09/16/2001

RSTR NONE



09162001

SEX M HAIR BLK EYES BRN

HGT 5'-06" WGT 176 lb

ISS 10/04/2024

DD 10/04/202459307/AAFD/29

CLASS: C - Veh w/GVWR ≤26000, No M/C
ENDORSEMENTS: None
RESTRICTIONS: None

This card is not acceptable for official federal purposes. This license is issued only as a license to drive a motor vehicle. It does not establish eligibility for employment, voter registration, or public benefits.

091601

Rev 08/29/2017
24278Y67654520401

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WHOLESALE

GOLD STAR MEMBER

COSTCO.COM

NON-TRANSFERABLE

FOR HOURS & LOCATIONS, VISIT WWW.COSTCO.COM

Mbr# 111949021880

SOPHIA MIRANDA



06/2022


COSTCO
WHOLESALE
GOLD STAR MEMBER
COSTCO.COM
NON-TRANSFERABLE

FOR HOURS & LOCATIONS, VISIT WWW.COSTCO.COM

Mbr# 112056878111

Gleidson Rodrigues Da Silva



Member Since
06/2022

Exhibit 6 - Evidence of Bona Fide Marriage: Letters of Support

Support Declaration for Family Petition

Terence Rodrigues Miranda
670 GELLERT BLVD
Daly City, CA 94015
415 837 8215
Terencemiranda@gmail.com
09/14/2026

SUPPORT DECLARATION FOR FAMILY-BASED PETITION

To whom it may concern,

My name is Terence Rodrigues Miranda, and I am writing this letter to express my support for my son-in-law, Gleidson Rodrigues da Silva, in his immigration process.

I met Gleidson around September 2021, when he began dating my daughter, Sophia Lehnen Rodrigues Miranda. Since then, I have had the opportunity to get to know him better and to closely observe their relationship and the family they have built together.

Gleidson has always been honest with us and has always kept us informed about his situation and the matter related to his name, Gleidson Silva Antunes. In 2022, after the end of the lease for the place where he lived, Gleidson was left with few housing options. For this reason, I decided to invite him to live with us, in our home located at 670 Gellert Blvd, Daly City, CA 94015.

During the period in which he lived with us, I was able to closely observe his relationship with my daughter, Sophia. As time went by, our relationship became closer and more familiar. Gleidson always showed respect, responsibility, and affection for my daughter, and our relationship was always peaceful and based on respect and consideration.

In October 2023, Gleidson and Sophia moved to 1025 Cadillac Way, Apt. 202, Burlingame, CA 94010, where they began building their own life together.

Around January 2024, Sophia and Gleidson told us that they were expecting a baby. This news was a great surprise and brought much joy to our entire family. Later, we had the gender reveal, when we found out that we were going to have a boy. The birth of our grandson, Arthur Lehnen Rodrigues, brought immense joy to all of us.

Arthur was born on August 8, 2024. Gleidson and Sophia continued living in the apartment in Burlingame until the end of the lease, on October 27, 2024. During this period, Gleidson began to cover a large portion of the family's expenses on his own, including costs related to the car, insurance, and other financial obligations. As these responsibilities increased, it became difficult for him to cover all the household expenses.

For this reason, Gleidson and Sophia moved back in with us at our home, at 670 Gellert Blvd, Daly City, CA 94015, where they have continued living ever since.

At that time, Sophia was still recovering from childbirth, and my wife, Francine Zancanaro Lehnen Rodrigues Miranda, helped greatly with caring for her and our grandson Arthur. Meanwhile, Gleidson focused on working to fulfill his financial responsibilities and support his family.

We offered our home and our support because, to us, Gleidson is not just our son-in-law. He has become like a son to me and a very important person to our entire family. As his father-in-law, I have great respect, affection, and consideration for him.

Our relationship has always been very peaceful. As happens in a family, we have playful moments, conversations, and also more serious conversations. Over the years, I have come to know him and to recognize the man he is, as well as the importance he has in my daughter's and my grandson's lives.

As a grandfather, I consider it extremely important to see my daughter, my son-in-law, and my grandson together as a family. The presence of parents in a child's upbringing and life is something that I consider to be fundamental. For this reason, I sincerely believe that Gleidson's permanence with Sophia and his son, Arthur, is very important to our family.

They have built a life together and have responsibilities, emotional bonds, and family ties that cannot simply be replaced. Gleidson participates in the life of his wife and son and is also part of our family.

I am not a person who usually talks much about my feelings, but I consider it important to make it clear, through this letter, that Gleidson is part of our family and is someone we want to continue having by our side.
I sincerely hope that Gleidson's request will be carefully considered and that he will have the opportunity to continue his life alongside my daughter, Sophia Lehnen Rodrigues Miranda, and his son, Arthur Lehnen Rodrigues, allowing his family to remain together.

I respectfully thank you for the attention given to this letter and for considering our family's situation.

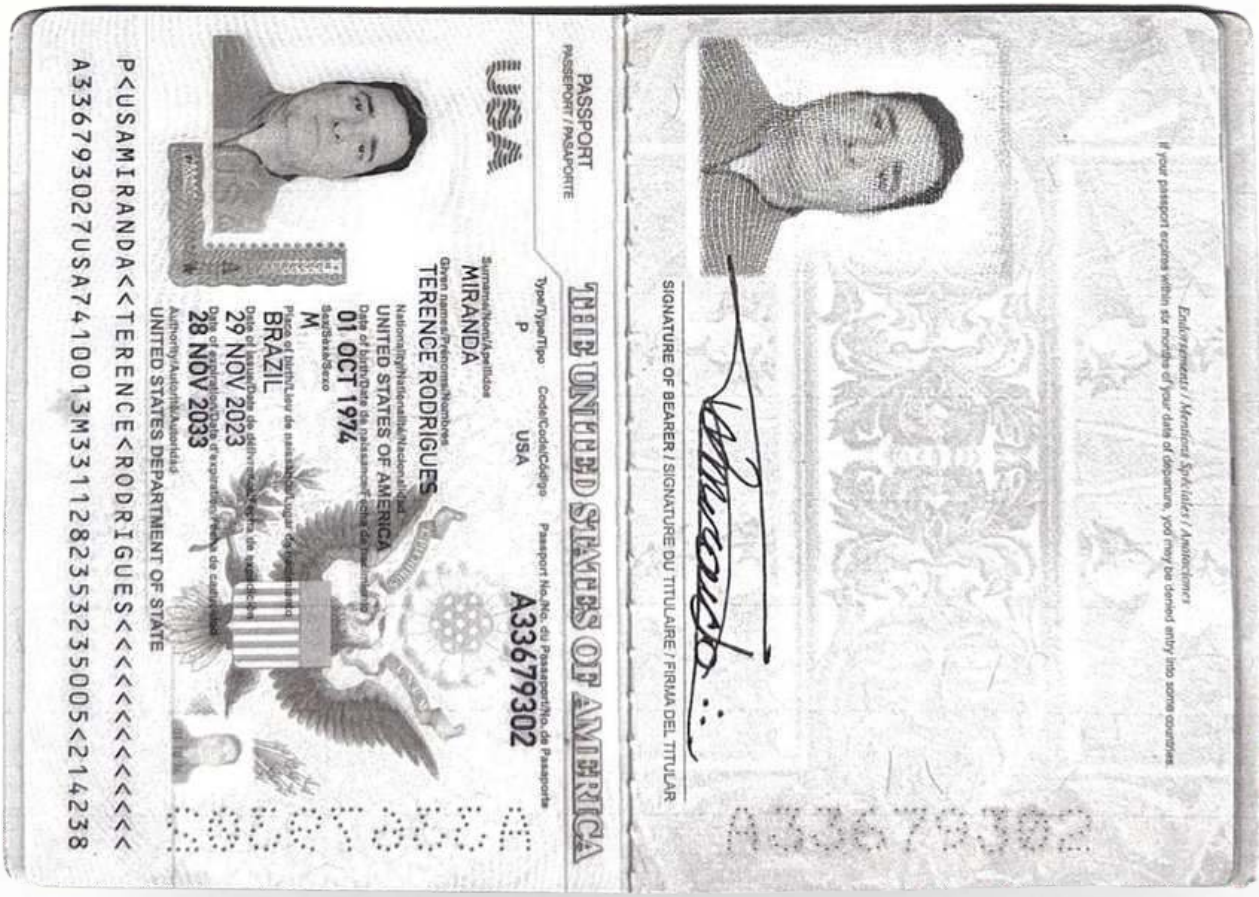
I declare, under penalty of perjury, that the information presented above is true and correct according to the best of my knowledge and belief.

Please feel free to contact me if additional information is needed.

Sincerely,

Signature:

Terence Rodrigues Miranda



I, Thainá de Brito Oliveira, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.



_____ Date: September 15, 2026.

Support Declaration for Family Petition

Terence Rodrigues Miranda

670 GELLERT BLVD

Daly City, CA 94015

415 837 8215

Terencermiranda@gmail.com

09/14/2026

DECLARAÇÃO DE APOIO PARA PETIÇÃO BASEADA EM FAMÍLIA

A quem possa interessar,

Meu nome é Terence Rodrigues Miranda, e escrevo esta carta para expressar meu apoio ao meu genro, Gleidson Rodrigues da Silva, em seu processo imigratório.

Conheci Gleidson por volta de setembro de 2021, quando ele começou a namorar minha filha, Sophia Lehnen Rodrigues Miranda. Desde então, tive a oportunidade de conhecê-lo cada vez melhor e de acompanhar de perto o relacionamento dos dois e a família que construíram juntos.

Gleidson sempre foi honesto conosco e sempre nos manteve informados sobre sua situação e sobre a questão relacionada ao seu nome, Gleidson Silva Antunes. Em 2022, após o término do contrato do local onde ele morava, Gleidson ficou sem muitas opções de residência. Por esse motivo, decidi convidá-lo para morar conosco, em nossa casa localizada na 670 Gellert Blvd, Daly City, CA 94015.

Durante o período em que morou conosco, pude acompanhar de perto seu relacionamento com minha filha, Sophia. Com o passar do tempo, nossa convivência se tornou cada vez mais próxima e familiar. Gleidson sempre demonstrou respeito, responsabilidade e carinho por minha filha, e nossa relação sempre foi tranquila e baseada em respeito e consideração.

Em outubro de 2023, Gleidson e Sophia se mudaram para 1025 Cadillac Way, Apt. 202, Burlingame, CA 94010, onde passaram a construir sua própria vida juntos.

Por volta de janeiro de 2024, Sophia e Gleidson nos contaram que estavam esperando um bebê. Essa notícia foi uma grande surpresa e trouxe muita alegria para toda a nossa família. Posteriormente, tivemos o chá de revelação, quando descobrimos que teríamos um menino. O nascimento de nosso neto, Arthur Lehnen Rodrigues, trouxe uma alegria imensa para todos nós.

Arthur nasceu em 08 de agosto de 2024. Gleidson e Sophia permaneceram morando no apartamento em Burlingame até o término do contrato, em 27 de outubro de 2024. Durante esse período, Gleidson passou a assumir sozinho grande parte das despesas da família, incluindo custos relacionados ao carro, seguro e outras obrigações financeiras. Com o aumento dessas responsabilidades, tornou-se difícil para ele cobrir todas as despesas da residência.

Por esse motivo, Gleidson e Sophia voltaram a morar conosco em nossa casa, no endereço 670 Gellert Blvd, Daly City, CA 94015, onde continuam vivendo desde então.

Naquele período, Sophia ainda estava se recuperando do parto, e minha esposa, Francine Zancanaro Lehnen Rodrigues Miranda, ajudou muito nos cuidados com ela e com nosso neto Arthur. Enquanto isso, Gleidson se concentrou em trabalhar para cumprir suas responsabilidades financeiras e manter sua família.

Oferecemos nossa casa e nosso apoio porque, para nós, Gleidson não é apenas nosso genro. Ele se tornou como um filho para mim e uma pessoa muito importante para toda a nossa família. Como sogro, tenho muito respeito, carinho e consideração por ele.

Nossa convivência sempre foi muito tranquila. Como acontece em uma família, temos momentos de brincadeiras, conversas e também momentos de conversas mais sérias. Ao longo dos anos, aprendi a conhecê-lo e a reconhecer o homem que ele é, assim como a importância que ele tem na vida da minha filha e do meu neto.

Como avô, considero extremamente importante ver minha filha, meu genro e meu neto juntos como uma família. A presença dos pais na criação e na vida de uma criança é algo que considero fundamental. Por isso, acredito sinceramente que a permanência de Gleidson junto de Sophia e de seu filho, Arthur, é muito importante para nossa família.

Eles construíram uma vida juntos e possuem responsabilidades, vínculos afetivos e laços familiares que não podem ser simplesmente substituídos. Gleidson participa da vida de sua esposa e de seu filho e também faz parte da nossa família.

Não sou uma pessoa que costuma falar muito sobre meus sentimentos, mas considero importante deixar claro, por meio desta carta, que Gleidson é parte da nossa família e é uma pessoa que queremos continuar tendo ao nosso lado.

Espero sinceramente que o pedido de Gleidson seja considerado com atenção e que ele tenha a oportunidade de continuar sua vida ao lado de minha filha, Sophia Lehnen Rodrigues Miranda, e de seu filho, Arthur Lehnen Rodrigues, permitindo que sua família permaneça unida.

Agradeço respeitosamente pela atenção dedicada a esta carta e pela consideração da situação de nossa família.

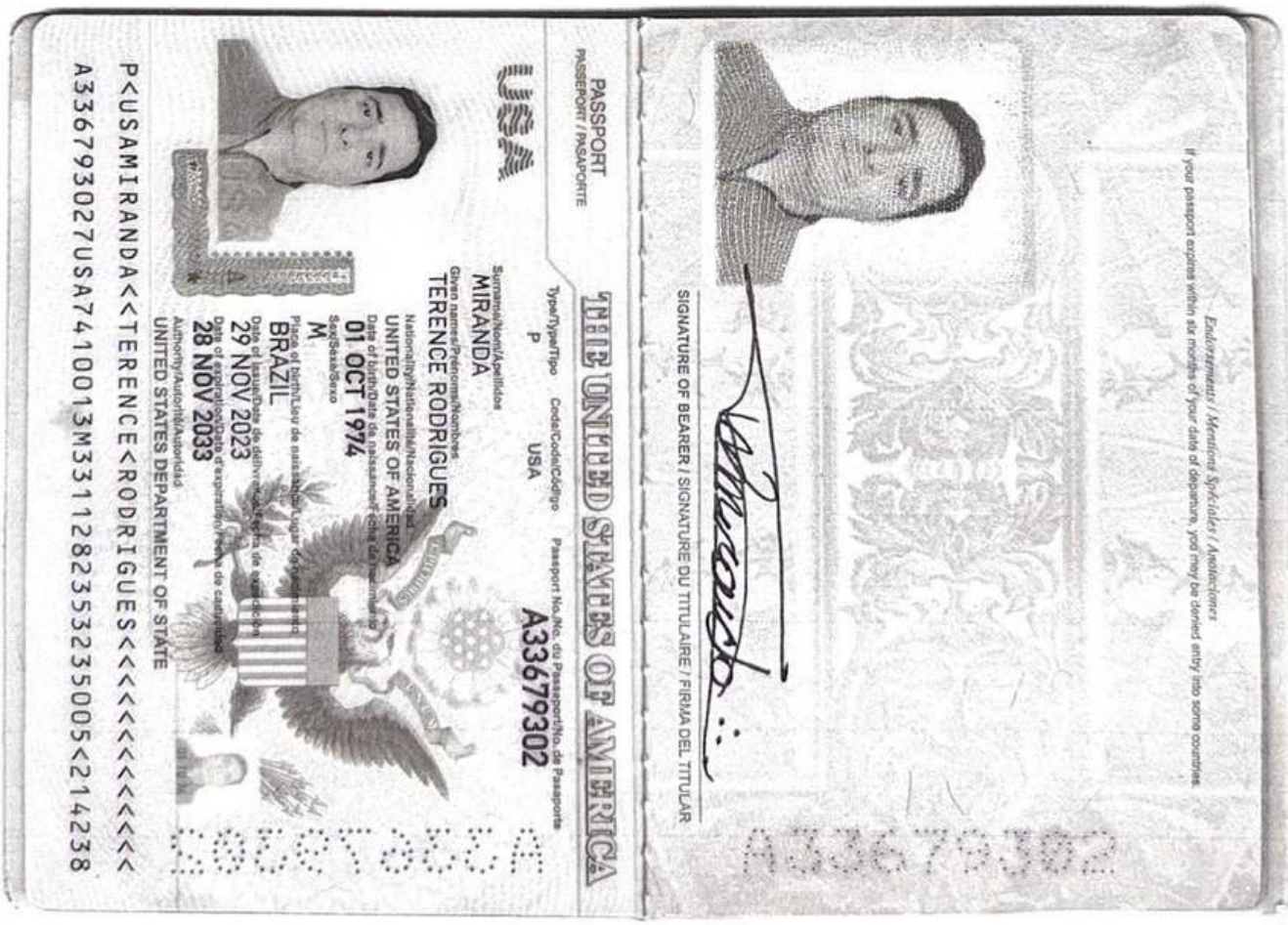
Declaro, sob pena de perjúrio, que as informações apresentadas acima são verdadeiras e corretas de acordo com o melhor do meu conhecimento e crença.

Por favor, sinta-se à vontade para entrar em contato comigo caso sejam necessárias informações adicionais.

Atenciosamente,

ASS: _____

Terence Rodrigues Miranda



Francine Zancanaro Lehnen Rodrigues Miranda

670 Gellert Blvd

DALY CITY, CA 94015

415 813-7194

Francine2022@hotmail.com

09/15/2026

Letter of Support for Family-Based Petition

To whom it may concern.

My name is Francine Zancanaro Lehnen Rodrigues Miranda, and I am writing this letter to express my support for my son-in-law, Gleidson Rodrigues da Silva, and to speak from the heart about the person he is and how important he is to our family.

Gleidson and I met shortly before he and my daughter started dating. He came to our old house, located at 1721 Parkview Drive, San Bruno, CA 94066, with Sophia and our other daughter, Gabriela. They had already known each other for a little while. I believe they were going out. So, that was the first time I saw him. Right from the start, I had a very good impression of him. After that day, I saw him again, but it was mostly through calls, because Sophia would go to his old place in Pittsburg, at the Kirker Creek complex, CA 94565. Since it was a bit far from our house, Sophia used to stay over, and whenever I called, the two of them were together, so I ended up seeing him on video calls, always very respectful, caring, and polite. Then one day, I was taken by surprise and learned that he wanted to ask for my blessing to officially date my daughter, and he wanted to do it in person. So, I decided to make dinner for us to talk about their relationship.

It was a fun dinner. At first, he was shy because my husband seems serious to those who do not know him, but he gradually relaxed and we talked a lot about his life, his work, and how he entered here in the US. It was at that moment that he opened up to us about his life, sharing that he had entered through Mexico and that he was convinced to come because of his situation, which was not the best in Brazil. His mother had a lot of difficulty paying off debts, so he decided to close his eyes to the danger and come to improve the lives of his mother and siblings. When he told me that he had entered and come this way, at only 17 years old, I was shocked, because he was practically a child when he entered here in the US. And that he did not quite understand what happened regarding them changing his name to come as the son of a father who was not his real father, under the name of Gleidson Silva Antunes. It was something very dangerous for a teenager, who was only 17 years old and alone with people he had never seen before. We asked why he had not tried to come with a legal visa, and he replied that his mother's situation in Brazil did not allow them to pay for tickets to travel to where the visa would be approved without the certainty that he would get it. After we talked, we understood his side. Brazil is a bureaucratic country to get things done, and if you do not have a lot of resources, it becomes even more difficult.

I was happy that he did not go through worse things that could have happened to him, because we have heard of many cases of crossings through Mexico that turned into tragedies. Thank God, he arrived here safely and ended up meeting my daughter, and they fell in love with each other and started a relationship on August 24, 2021. We spent some time living at that address, 1721 Parkvlew Drive, San Bruno, CA 94066. In June 2022, we moved to 70 Gellert Blvd, Daly City, CA 94015, where, shortly after, my husband and I invited him to come live with us, to be closer to our daughter. And also to closely follow their relationship. Gleidson has always been very hardworking and honest.

From the beginning, we have always had a very good relationship, not only as mother-in-law and son-in-law, but also as a mother and son, with respect and affection. His relationship with Sophia has always been very open and peaceful. It is easy to see that the two of them truly love each other. After some time, he and my daughter Sophia decided to move out to have their own place and try to build a family. They moved to their new house around October 2023, at 1025 Cadillac Way, Apt. 202, Burlingame, CA 94010.

And there they began their lives as a couple. In January 2024, Sophia and Gleidson told us about the pregnancy: they were expecting a baby. We were very happy with the news that we were going to be grandparents. Later, we organized a gender reveal party to find out the baby's gender, where we discovered that it would be a boy, our Arthur Lehnen Rodrigues. It was an immense joy for our family. We were all very eager to meet him. Nine months passed and the day of Sophia's delivery arrived, a day I will never forget. I saw my daughter go through a very difficult ordeal, I felt so sorry for her having to endure such pain, and we also almost lost our Arthur. His little heart stopped for a few seconds, and in that moment, I experienced a despair I never expected to go through. We prayed to God not to let anything bad happen. The nurses took her to the operating room to deliver the baby as quickly as possible, because a natural birth was no longer possible; the baby was not doing well. Gleidson stayed by her side the entire time. There, I could see how important he was to our daughter and our grandson. He also went into the operating room where they were going to perform the C-section. Arthur was born at 9:38 p.m. on 08/08/2024. A few minutes later, Gleidson told us that Arthur had been born and that everything had gone well, and that Arthur was in the observation room and could not receive visitors other than his father yet. We were anxious and distressed, a little worried too, but that same day we were able to see him. He had small tubes in his mouth to drain the fluid he had swallowed during delivery. The next day, he was able to leave and go to the room where my daughter was, so they could be together.

Gleidson and Sophia moved back in with us after Arthur was born. Since Sophia could not work and Gleidson could not take care of her alone, it was easier for me to care for her and my grandson with them living with us again. And up close, I saw Gleidson and Sophia become admirable, responsible, caring, and loving parents. As a grandmother and a mother, I cannot imagine my daughter and my grandson having to face life without Gleidson's presence by their side. He is part of our family and holds an important place in the lives of our daughter and our grandson. His absence would not only mean the separation of a couple, but it would also represent a great emotional and family loss for all of us.

Therefore, I respectfully ask that you consider the possibility of Gleidson remaining in the United States alongside our daughter Sophia and their son. As a mother, my greatest wish is to see my daughter and my grandson living together, with Gleidson's support and presence.

Honestly, I believe that Gleidson is a good father, a good husband, and a good son-in-law. He is someone our family has learned to love, respect, and consider a part of us.

I sincerely ask that his situation be reviewed taking into account not only the legal aspects of the case, but also the family impact that a separation could cause.

I respectfully thank you for your attention and for the opportunity to present my perspective and my support for him.

I declare, under penalty of perjury, that the foregoing is true and correct to the best of my knowledge and belief.

Please feel free to contact me if further information is needed.

Sincerely,

Signature: ---//signature//---

Francine Zancanaro Lehnen Rodrigues Miranda.

I, André Vinícius Inacio Penna Mello, telephone number 415 425-2508, mailing address P.O. Box 90487, San Diego, CA 92169, certify that the professional translation of this document from Portuguese to English has been performed by myself, a qualified translator fluent in both languages, and that the following is an accurate and complete translation of the document.



Date: September 21, 2026.

Francine Zancanaro Lehnen Rodrigues Miranda

670 Gellert Blvd

DALY CITY,CA 94015

415 813-7194

Francine2022@hotmail.com

09/15/2026

Declaração de apoio para petição baseada em família

A quem possa interessar,

Meu nome é Francine Zancanaro Lehnen Rodrigues Miranda, e escrevo esta carta para expressar meu apoio ao meu genro Gleidson Rodrigues da Silva, e para falar de coração sobre a pessoa que ele é e sobre a importância que ele tem para nossa família.

Eu e o Gleidson nos conhecemos um pouco antes de ele e minha filha namorarem. Ele foi à nossa antiga casa, localizada em 1721 Parkview Drive, San Bruno, CA 94066, com a Sophia e nossa outra filha, Gabriela. Eles já se conheciam há um tempinho. Acredito que eles estavam saindo juntos. Então, essa foi a primeira vez que o vi. De primeira, tive uma impressão muito boa dele. Depois desse dia, eu o vi novamente, mas era mais por ligações, porque a Sophia ia para a casa antiga dele em Pittsburg, no condomínio Kirker Creek, CA 94565. Como era um pouco longe da nossa casa, a Sophia costumava dormir por lá, e sempre que eu ligava, os dois estavam juntos, então eu acabava vendo ele por videochamada, sempre muito respeitoso, carinhoso e educado. Então teve um dia em que fui pega de surpresa e soube que ele queria pedir a mão da minha filha em namoro e queria pedir pessoalmente. Então resolvi fazer uma janta para conversarmos sobre o relacionamento deles.

Foi um jantar divertido. No começo, ele estava com vergonha porque meu marido parece sério para quem não o conhece, mas aos poucos ele foi se soltando e conversamos bastante sobre sua vida, sobre o que trabalhava, como ele entrou aqui nos EUA, e foi nesse momento que ele abriu o jogo para nós sobre sua vida, que ele teria entrado pelo México e que foi convencido a vir por conta da sua situação, que não era das melhores no Brasil. Sua mãe tinha muita dificuldade em pagar as dívidas, então ele resolveu fechar os olhos para o perigo e vir para melhorar a vida da sua mãe e dos irmãos. Quando ele me disse que tinha entrado e vindo dessa maneira, com apenas 17 anos, eu fiquei em choque, porque ele era praticamente uma criança quando entrou aqui nos EUA. Que não entendia muito bem o que aconteceu deles terem trocado seu nome para vir como filho de um pai que não era o pai verdadeiro dele, pelo nome de Gleidson Silva Antunes. Foi algo muito perigoso para um adolescente, que tinha apenas 17 anos e estava sozinho com pessoas que ele nunca tinha visto antes. Perguntamos o porquê de ele não ter tentado vir com visto legalizado, e ele nos respondeu que a situação de sua mãe no Brasil não dava para pagar passagens para ir aonde aprovassem o visto e não ter a certeza de que conseguiria. Depois que conversamos, entendemos o lado dele. O Brasil é um país burocrático para fazer as coisas e, se você não tem muitas condições, fica ainda mais difícil.

Eu fiquei feliz que ele não tenha passado por coisas piores que lhe podiam acontecer, porque já ouvimos muitos casos de travessia pelo México que viraram tragédia. Graças a Deus, ele chegou em segurança aqui e acabou conhecendo minha filha, e se apaixonaram um pelo outro e começaram um relacionamento no dia 24 de agosto de 2021. Passamos um tempo morando nesse endereço, 1721 Parkview Drive, San Bruno, CA 94066. Em junho de 2022, nos mudamos para 670 Gellert Blvd, Daly City, CA 94015, onde, pouco tempo depois, eu e meu marido o convidamos para vir morar conosco, para ficar mais perto de nossa filha. E também acompanhar de perto o relacionamento deles. O Gleidson sempre foi muito trabalhador e correto.

Desde o começo, sempre tivemos uma relação muito boa, não só de sogra para genro, mas também de uma mãe para um filho, com respeito e carinho. Sua relação com a Sophia sempre foi muito aberta e tranquila. Dá para ver que os dois se amam de verdade. Depois de um tempo, ele e minha filha Sophia resolveram se mudar para ter o cantinho deles e tentar construir uma família. Eles se mudaram para a nova casa aproximadamente em outubro de 2023, para 1025 Cadillac Way, Apto 202, Burlingame, CA 94010.

E lá começaram suas vidas como um casal. Em janeiro de 2024, Sophia e Gleidson nos contaram sobre a gravidez: estavam à espera de um bebê. Ficamos muito felizes com a notícia de que seríamos avós. Depois, organizamos um chá de revelação para saber o sexo do bebê, no qual descobrimos que seria um menino, nosso Arthur Lehnen Rodrigues. Foi uma alegria imensa para nossa família. Todos ficamos muito ansiosos para conhecê-lo. Nove meses se passaram e chegou o dia do parto da Sophia, um dia que nunca vou esquecer. Vi minha filha passar por uma prova muito difícil, senti tanta dó dela por ter que passar por dores, e também quase perdemos nosso Arthur. Seu coraçãozinho parou por alguns segundos e ali eu vi um desespero que eu não esperava passar. Pedimos a Deus para que não deixasse nada de mal acontecer. As enfermeiras levaram ela para a sala de cirurgia para retirar o bebê o mais rápido possível, porque parto normal não dava mais, o nenê não estava bem. O Gleidson ficou ao lado dela o tempo todo. Ali pude ver o quanto ele era importante para nossa filha e nosso neto. Ele também foi para a sala de cirurgia onde iriam fazer a cesárea. Às 21:38 do dia 08/08/2024, o Arthur nasceu. Poucos minutos depois, o Gleidson nos disse que o Arthur tinha nascido e que tinha ocorrido tudo bem, e que o Arthur estava na sala de observação e que ainda não poderia receber visita além do pai. Ficamos ansiosos e aflitos, um pouco preocupados também, mas no mesmo dia conseguimos vê-lo. Estava com uns caninhos em sua boca para drenar a água que ele tinha engolido do parto. No dia seguinte, ele pôde sair e ir para o quarto onde estava minha filha, e ficar juntinhos.

O Gleidson e a Sophia voltaram para morar conosco após o nascimento do Arthur. Como a Sophia não podia trabalhar e o Gleidson não podia cuidar dela sozinho, foi mais fácil para mim cuidar dela e do meu neto, morando novamente conosco. E de perto eu vi o Gleidson e a Sophia se tornarem pais admiráveis, responsáveis, cuidadosos e amorosos, como avô e mãe. Não consigo imaginar minha filha e meu neto tendo que enfrentar a vida sem a presença de Gleidson ao lado deles. Ele faz parte da nossa família e ocupa um lugar importante na vida da nossa filha e do nosso neto. Sua ausência não significaria apenas a separação de um casal, mas também representaria uma grande perda emocional e familiar para todos nós.

Por isso, peço respeitosamente que seja considerada a possibilidade de Gleidson permanecer nos Estados Unidos ao lado de nossa filha Sophia e de seu filho. Como mãe, meu maior desejo é ver minha filha e meu neto vivendo juntos, com o apoio e a presença do Gleidson.

Sendo sincera, acredito que Gleidson é um bom pai, um bom marido e um bom genro. Ele é alguém que nossa família aprendeu a amar, respeitar e considerar parte de nós.

Peço de coração que sua situação seja analisada levando em conta não apenas os aspectos legais do caso, mas também o impacto familiar que uma separação poderia causar.

Agradeço respeitosamente pela atenção e pela oportunidade de apresentar minha perspectiva e meu apoio a ele.

Declaro, sob pena de perjúrio, que o exposto acima é verdadeiro e correto de acordo com o melhor do meu conhecimento e crença.

Por favor, sinta-se à vontade para entrar em contato comigo caso sejam necessárias mais informações.

Atenciosamente.

ASS: Francine Z. L. R. Miranda

Francine zancanaro lehnen rodrigues miranda.


CALIFORNIA
USA
DRIVER LICENSE
CA
4d DLN F5405652
4b EXP 04/19/2028
3 DOB 04/19/1977
1 ZANCANARO LEHNEN R MIRANDA
2 FRANCINE
8 670 GELLERT BLVD
DALY CITY, CA 94015
9 CLASS C
9a END NONE
12 REST NONE
4a ISS 04/13/2023
5 DD 04/12/2023599OD/CCFD/28
15 SEX F
18 EYES BRN
16 HGT 5'-11"
19 HAIR BLK
17 WGT 190 lb


21 26104
F5405652040I
Rev 05/20/2024
04/19/1977
CLASS: C - Veh w/GVWR ≤ 26000, No M/C
ENDORSEMENTS: None
RESTRICTIONS: None
04/19/77
This license is issued as a license to drive a motor vehicle; it does not establish eligibility for employment, voter registration, or public benefits.

Maricela Quijano
72 Scott St, Apt 01
San Bruno,CA, 94066
Phone: 415-595-6181
mari.quijano2@gmail.com

May 15,2026

To Whom It May Concern,

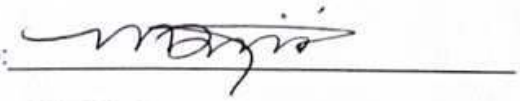
My name is Maricela Quijano,I am an American Citizen and I am writing this letter in support of Gleidson Rodrigues Da Silva regarding their immigration case.

I have known him for around 5 years or more practically since he started dating Sophia. He always showed to be a caring, responsible and hardworking person. I met him at his girlfriend's house during a birthday party. They always seem to be a great match and I remember telling Sophia what a great boy he was. I really liked him right away! They were always holding hands like love birds, traveling together or hanging out watching a movie.

Gleidson has always demonstrated to be honest and a family oriented man. He always helped Sophia at family gatherings. I saw him all the time with family and or common friends. Personally I have seen their relationship flourish all the way to his recent marriage. It was a beautiful ceremony filled with friends and family. Now he is a father to an 18 month old boy named Arthur. He plays an important role in both his wife's and son's lives. He is undoubtedly financially responsible for his family and provides the best emotional support for his wife and son.

It is gratifying to be part of a loving young couple that want to weave their lives in such a complex society. On that note I ask for you to take this letter into consideration when reviewing Gleidson immigration situation. I really believe that he will continue to play an important role in this country and in his family and friends lives.

Please feel free to contact me if you need any additional information

Maricela Quijano: 

Date: 5-15-2026


We the People
Of the United States,
in Order to form a more perfect Union,
establish Justice, insure domestic Tranquility,
provide for the common defence,
promote the general Welfare, and secure
the Blessings of Liberty to ourselves and
our Posterity, do ordain and establish this
Constitution for the United States of America.
PASSPORT
PASSEPORT
PASAPORTE
USA
UNITED STATES OF AMERICA
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USA
590567590
QUIJANO
MARICELA
UNITED STATES OF AMERICA
20 Jun 1974
EL SALVADOR
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27 Aug 2018
26 Aug 2028
United States
Department of State
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Jose Antonio Rodrigues Miranda
72 Scott St, Apt 01
San Bruno, CA, 94066
Phone: 415-571-7970
professorjarm@gmail.com
September 10, 2026

Affidavit of Support for Family-Based Petition

I, Jose Antonio Rodrigues Miranda, a United States citizen, write this letter in support of the marriage between Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva.

I first met Gleidson through my niece, Sophia, when they started dating. From the beginning, Gleidson appeared to be a good person, a hardworking young man, and very respectful. After getting to know him better and realizing that he was responsible and dedicated, I invited him to work with me at my towing company as a tow truck driver.

Gleidson worked very well and became one of the best drivers I had. Unfortunately, I later had to sell the company, and Gleidson found another job, if I am not mistaken, in construction.

I was very happy when I learned that my niece was pregnant. Of course, as they were both still young, I was initially a little concerned. However, it was very clear to me that they truly loved each other, and I knew their child would grow up in a happy home with loving and responsible parents.

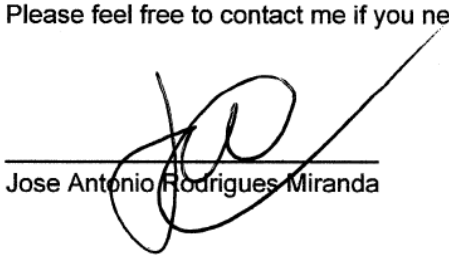
I have had the pleasure of watching their son, Arthur, grow up. I frequently visit their home, and they also come to visit my family. Artur is growing up in a happy and loving household with two parents who deeply love each other and love him above everything else.

I also attended their wedding ceremony, which was beautiful and took place in a park in San Mateo, California.

I write this letter to confirm that Gleidson is a good, hardworking, and responsible man. He truly loves his wife, my niece Sophia, and his son Arthur very much. Gleidson deserves the opportunity to continue living with his family and building a happy life here in the United States. I believe he is a person who will contribute positively to American society.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge and belief.

Please feel free to contact me if you need any additional information



09/21/2026

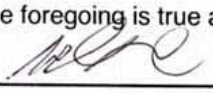
Jose Antonio Rodrigues Miranda


We the People
Of the United States,
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UNITED STATES OF AMERICA
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590792509
RODRIGUES MIRANDA
JOSE ANTONIO
UNITED STATES OF AMERICA
08 Apr 1976
BRAZIL
04 Sep 2018
03 Sep 2028
M
United States
Department of State
SEE PAGE 27
P<USARODRIGUES<MIRANDA<<JOSE<ANTONIO<<<<<<<<<
5907925094USA7604083M2809034340625031<367844

Luis Gustavo Queiroz
415-610-9109
luisgustavoqueiroz31@gmail.com
08/31/07

I met Sophia, the wife of Gleidson, when I was 6 years old at a birthday party. At first I was a little shy to talk to her because we had never met and she was much older than me, but ever since that day our families became very close and we started seeing each other more and more at family events and gatherings. Over time, Sophia truly became part of our family, and today I honestly consider her like a cousin to me. When I was younger and my parents had to work, Sophia would often take care of me. She was always very kind, caring, patient, and supportive. She would help me with my school work whenever I needed it and always treated me like family. Growing up, our families would also go on trips together to places like Los Angeles, Lake Tahoe, and Las Vegas. We created many great memories together over the years, and I always enjoyed when Sophia was there because she brought fun energy around everyone and would always make me laugh. I would always ask my parents if Sophia was going because the trip would not be fun without her. Later on, Sophia told my family that she had a boyfriend named Gleidson and we were all excited to meet him. The first time I spoke with him was through a FaceTime call where we introduced ourselves. A few days later, I met him in person at Sophia's father's birthday party. From the moment I shook his hand, I could tell he was a very respectful, outgoing, and genuine person. As time passed and we spent more time together hanging out at family gatherings and trips, it became very clear to me that Sophia and Gleidson were a perfect match. Over the years, I have personally witnessed the strong relationship between Sophia and Gleidson. They consistently spend time together, support each other, and always present themselves as a loving and committed couple. I have seen them go to family events together such as my birthday party, my parents', Christmas, and Thanksgiving. I have seen them travel together and build a happy family life together. Their relationship has always appeared natural, sincere, and stable to me. I have also personally seen how much they both care for their child. Sophia and Gleidson are very attentive, loving, and responsible parents who make their child their top priority. The way they work together as parents and support one another shows the strength of their relationship and family bond. As I continued getting to know Gleidson over the years, we became very close as well. We have gone on trips together, including multiple trips to Lake Tahoe to snowboard, and during those experiences I got to know him even better as a person. On those 4-hour car rides on the way there, he would always give me the best advice about life and how I should treat my girlfriend, and right then I knew Sophia was with a man who was true with his intentions and truly loved her. He has always treated both Sophia and their family with love, respect, and loyalty. Based on everything I have personally witnessed throughout the years, I truly believe that Sophia and Gleidson have a genuine and loving marriage.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge.



Signature 05/22/24

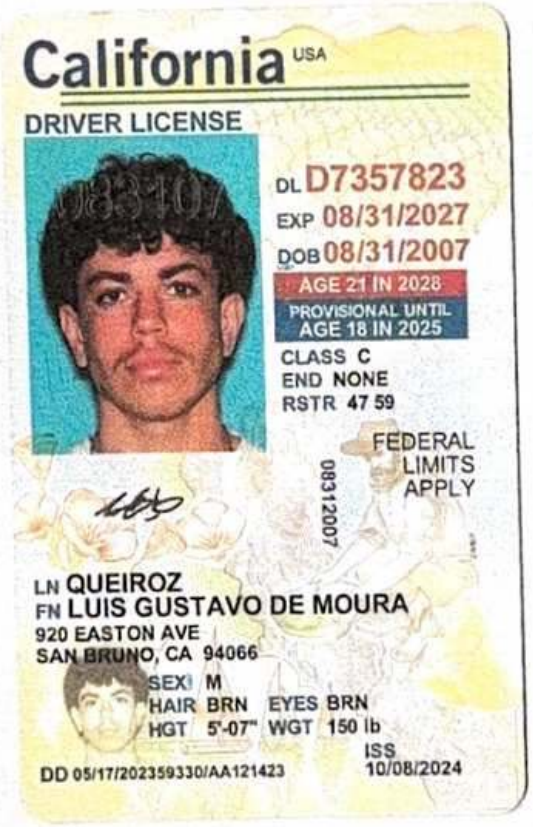

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FN LUIS GUSTAVO DE MOURA
920 EASTON AVE
SAN BRUNO, CA 94066
SEX M
HAIR BRN EYES BRN
HGT 5'-07" WGT 150 lb
ISS 10/08/2024
DD 05/17/202359330/AA121423

Exhibit 7 - Evidence of Bona Fide Marriage: Photographic Evidence of Relationship

Photographic Evidence of Bona Fide Marriage

Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva

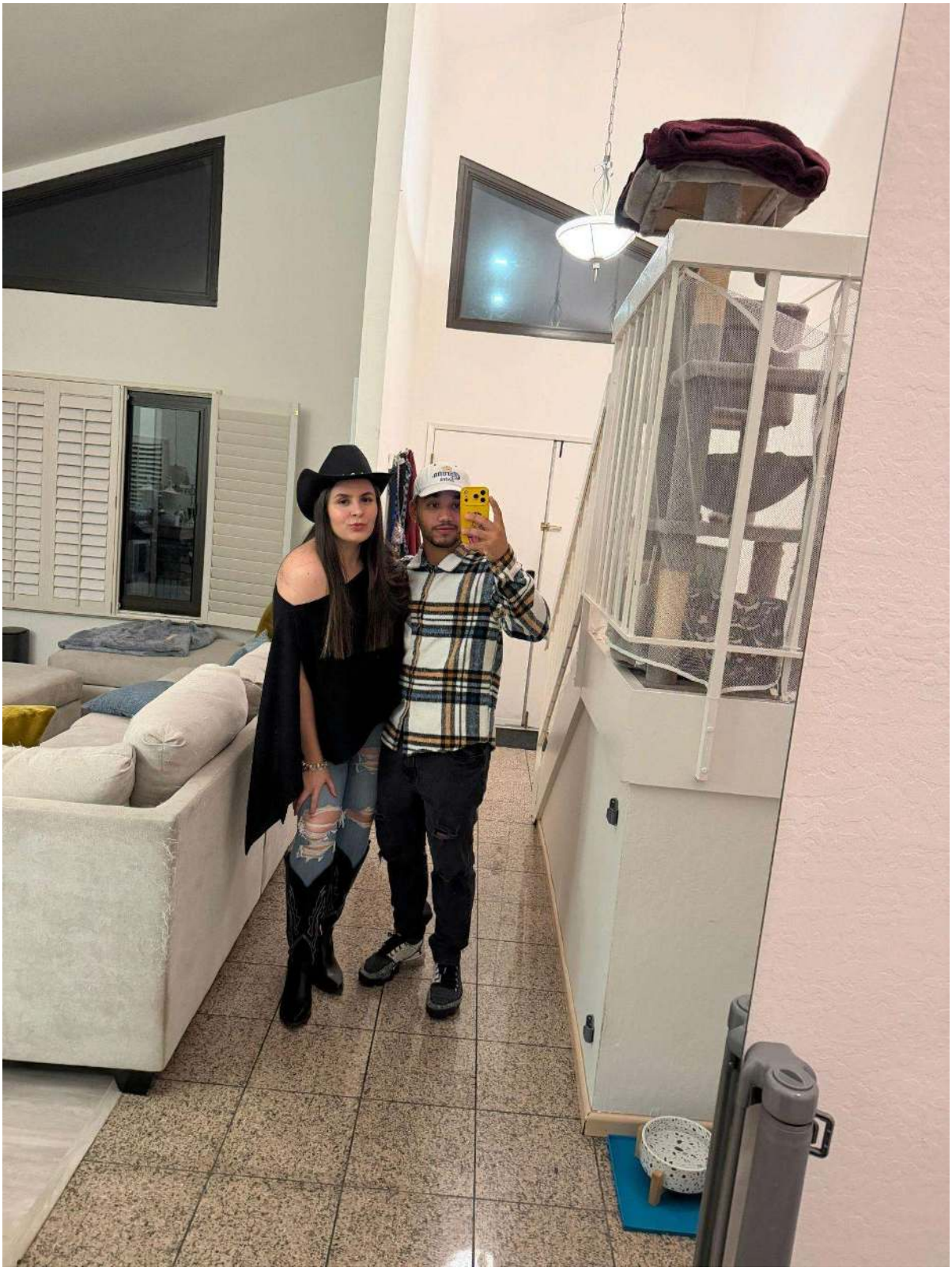




03/2/2026 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at their wedding.



03/15/2026 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva going to a party.



03/11/2026 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva getting ready for a Brazilian country party.



03/15/2026 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, at a birthday party.



12/20/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva celebrating her birthday.



11/27/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, in a photoshoot.



12/07/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur.



03/11/2026 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva for a Brazilian country show.



08/16/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, for his first birthday.



06/12/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, in a photoshoot for his birthday.


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POP
CORN



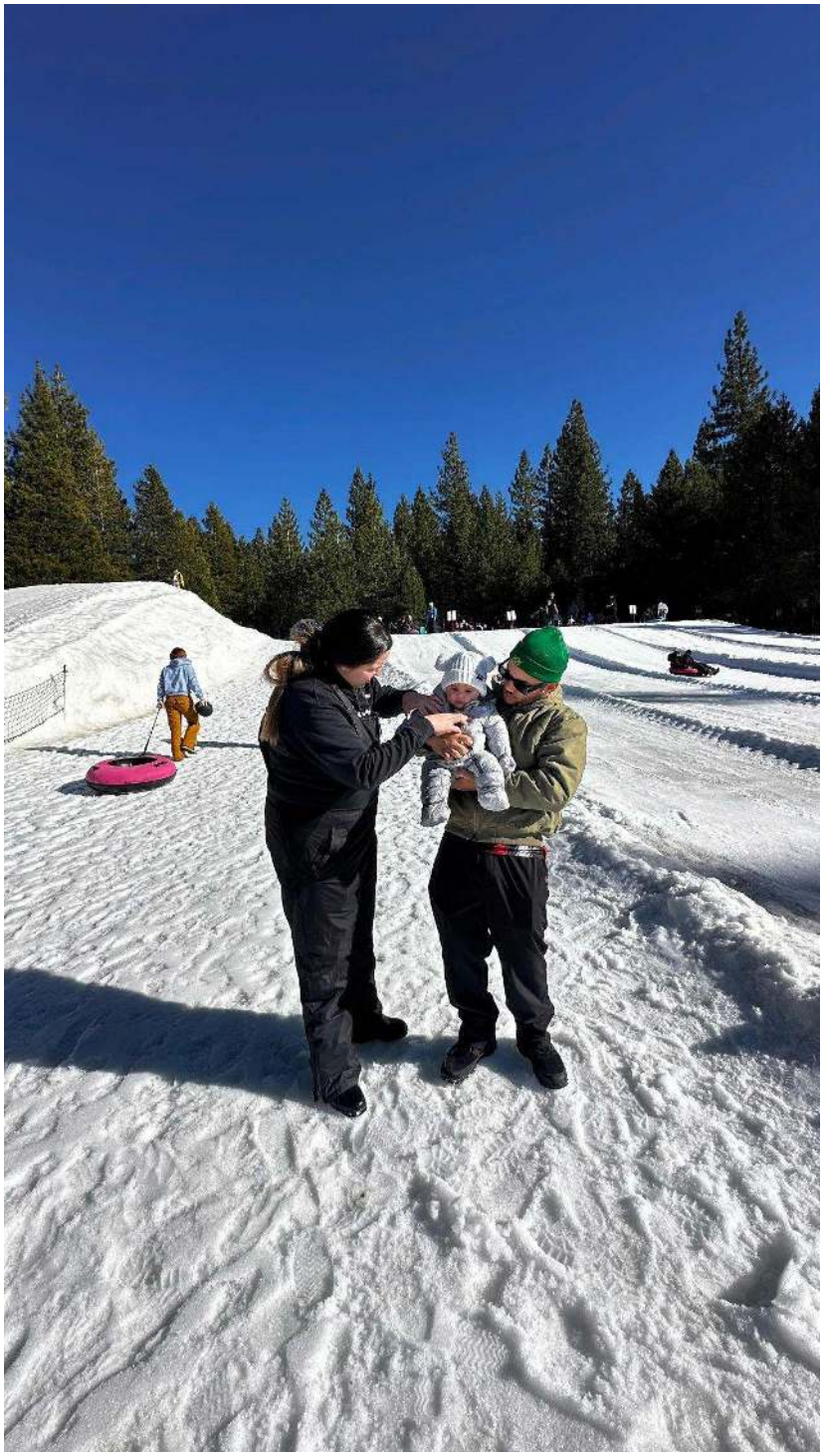
05/26/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, camping by the lake.



03/06/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur.



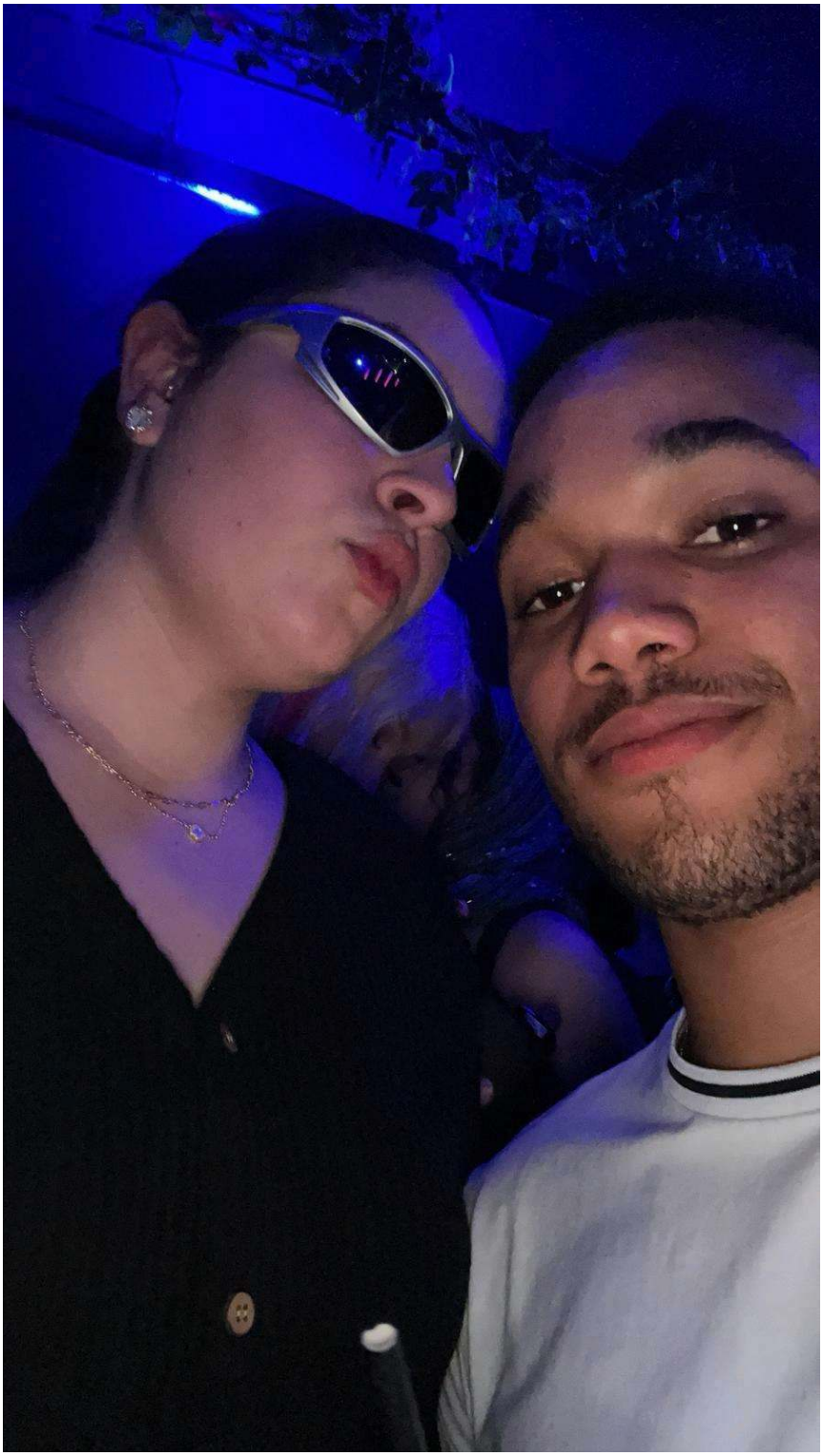
05/10/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, at a birthday party of her father’s friend, Ibson.



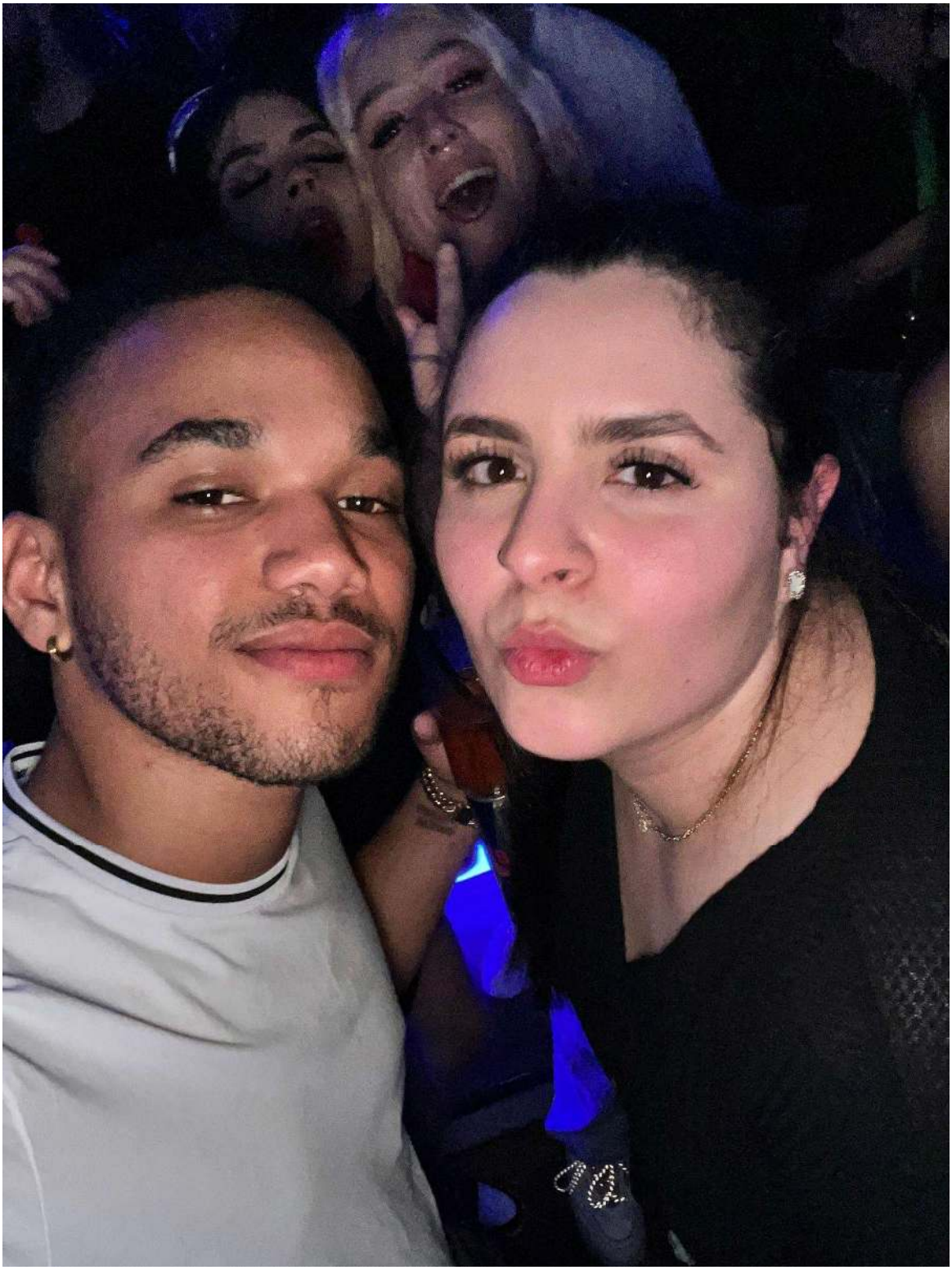
03/01/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, enjoying the snow at Lake Tahoe, CA.



03/01/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, enjoying the snow at Lake Tahoe, CA.



02/01/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at a party in San Francisco, CA.



02/01/2025 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at a party in San Francisco, CA.



12/08/2024 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, celebrating his four months birthday.



11/28/2024 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, for thanksgiving.



11/28/2024 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, for thanksgiving.



11/28/2024 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with their son, Arthur, for thanksgiving.



08/11/2024 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva leaving the hospital with their son, Arthur.



08/09/2024 - Gleidson Rodrigues da Silva with his son Arthur, one day after his birth.



05/18/2024 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at their son, Arthur, baby shower.



05/18/2024 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at their son, Arthur, baby shower.



07/08/2023 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at a Brazilian country party.



07/04/2023 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva camping on summer.



06/01/2023 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva getting ready for a friend’s wedding.



06/01/2023 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva getting ready for a friend’s wedding.



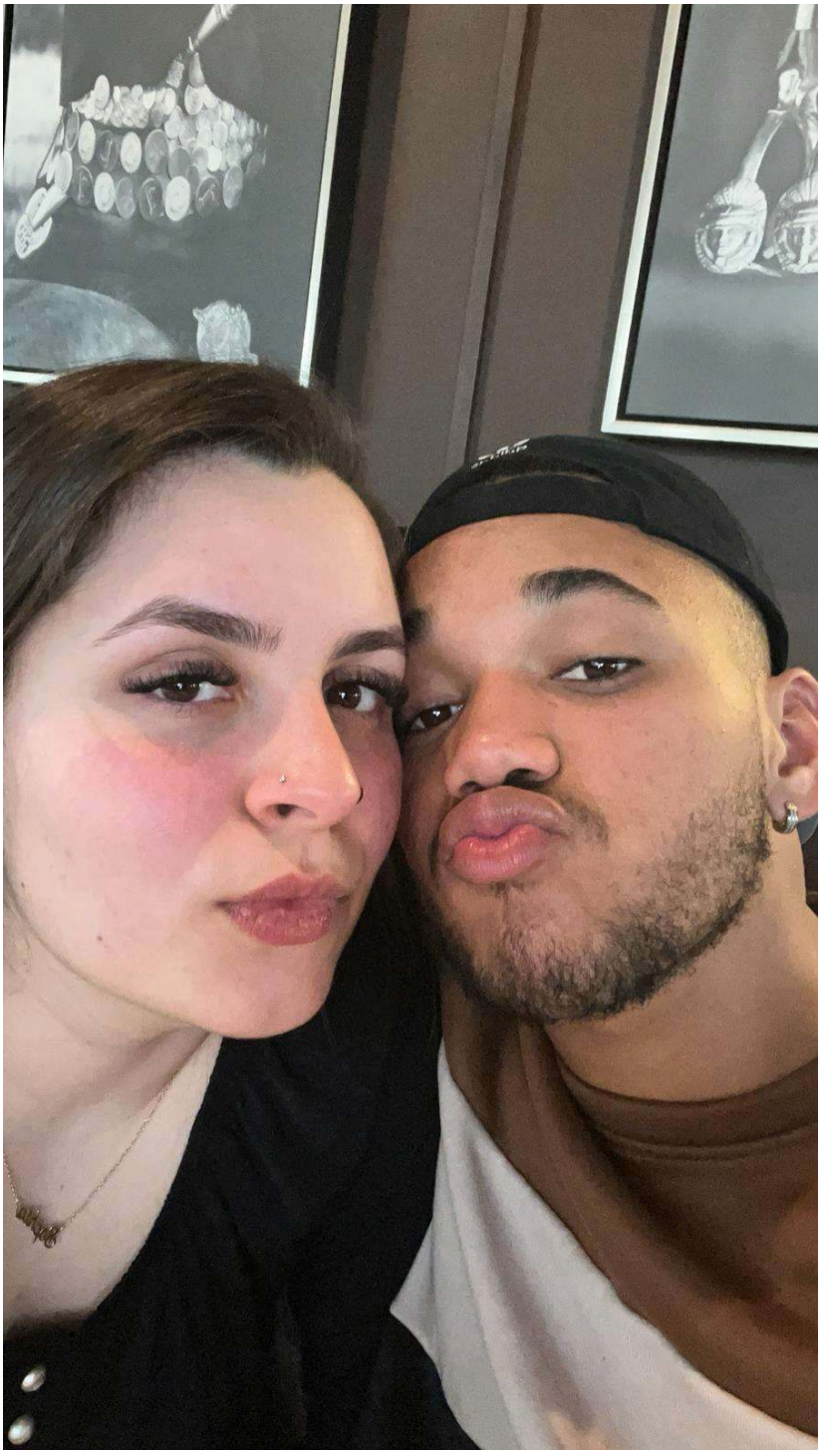
04/14/2023 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at home dyeing his hair.



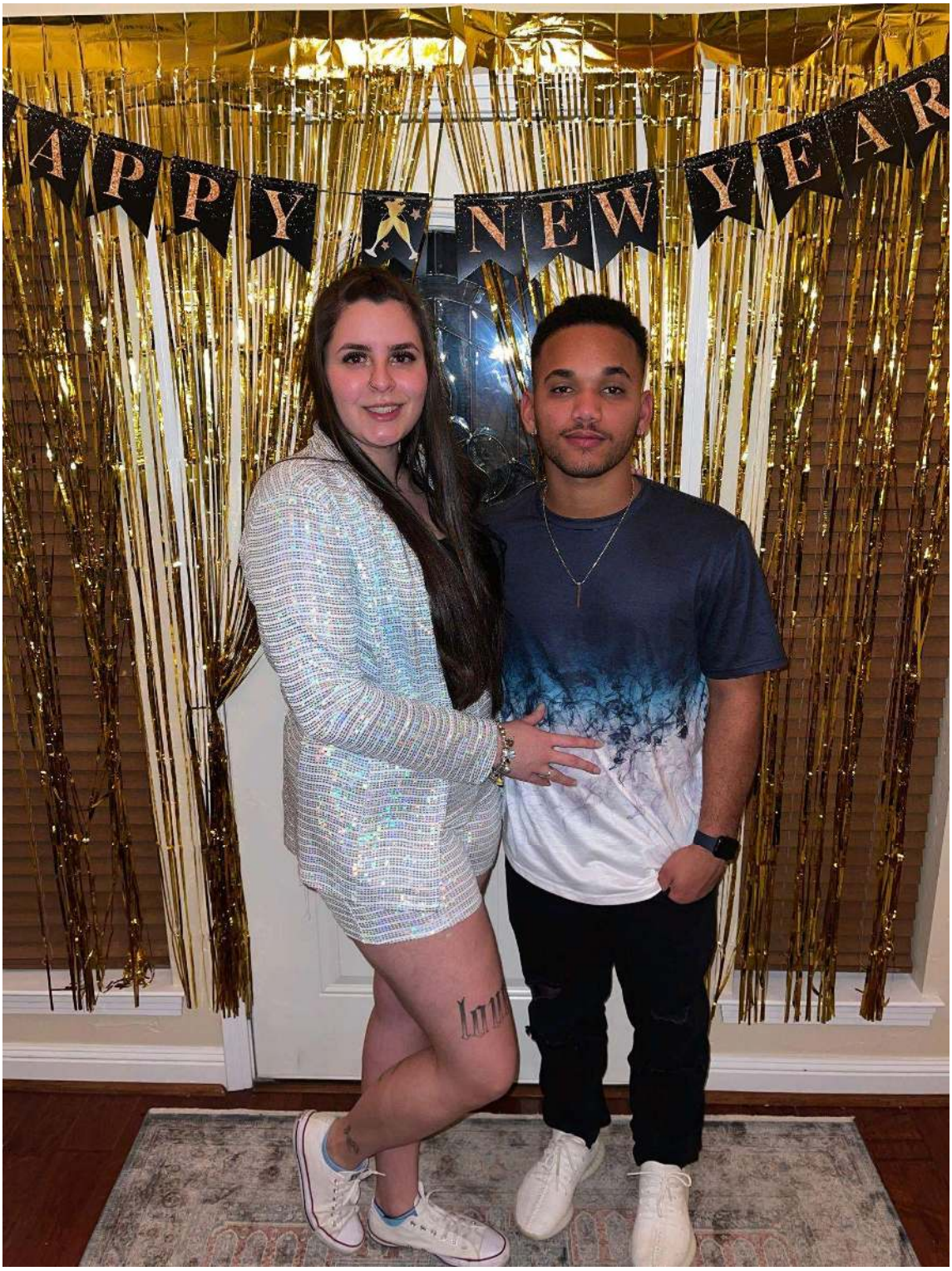
04/09/2023 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva going to a zoo with his young brother.



03/27/2023 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at a Brazilian country party.



02/19/2023 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at a steakhouse celebrating his sister 's birthday.



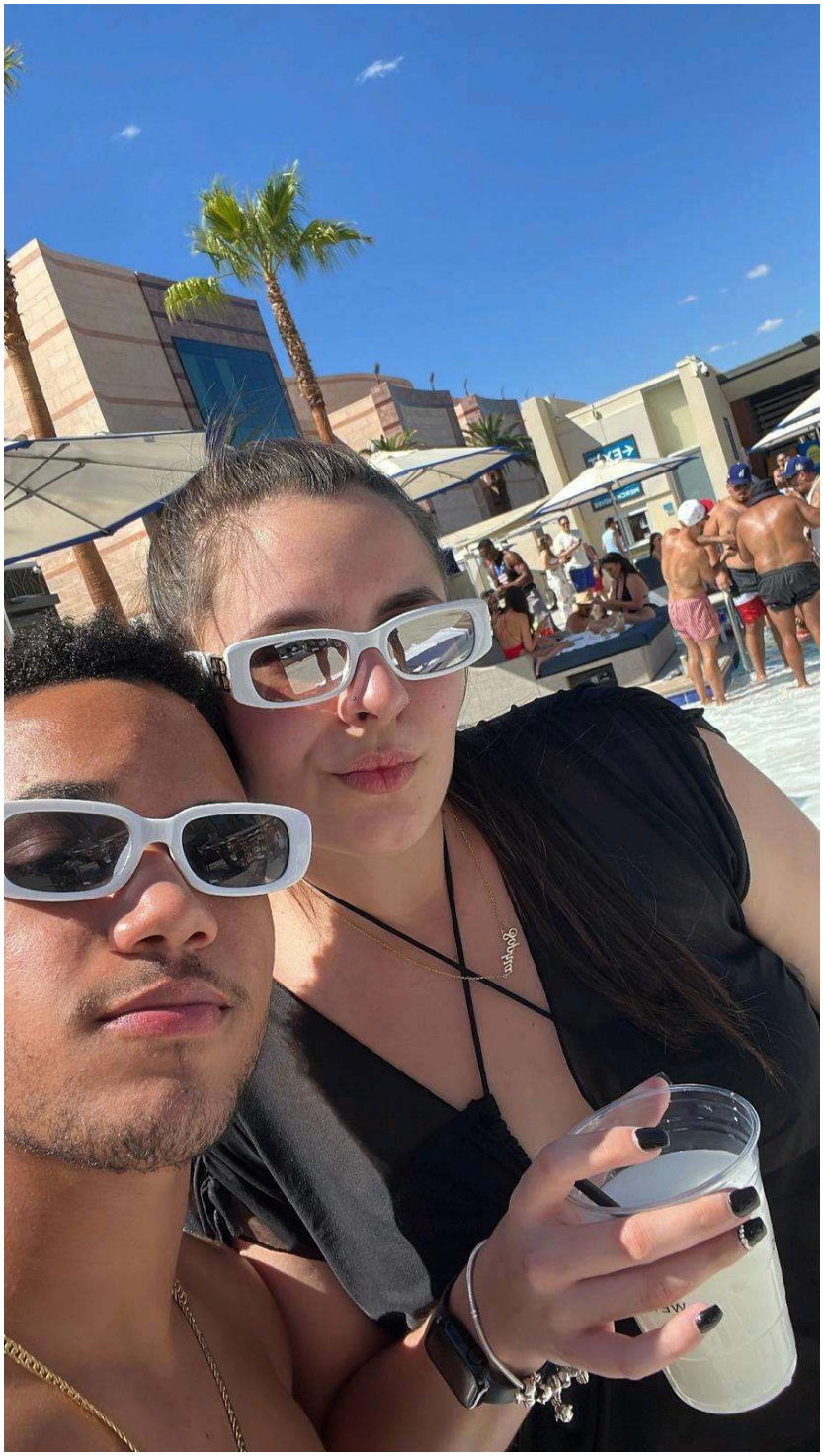
12/31/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva for New Year’s Eve.



12/24/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva with his mother, celebrating christmas at his aunt 's house.



09/17/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva in Las Vegas for his 21st birthday.



09/16/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at a pool party in Las Vegas for his 21st birthday.



09/15/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva in Las Vegas for his 21st birthday.



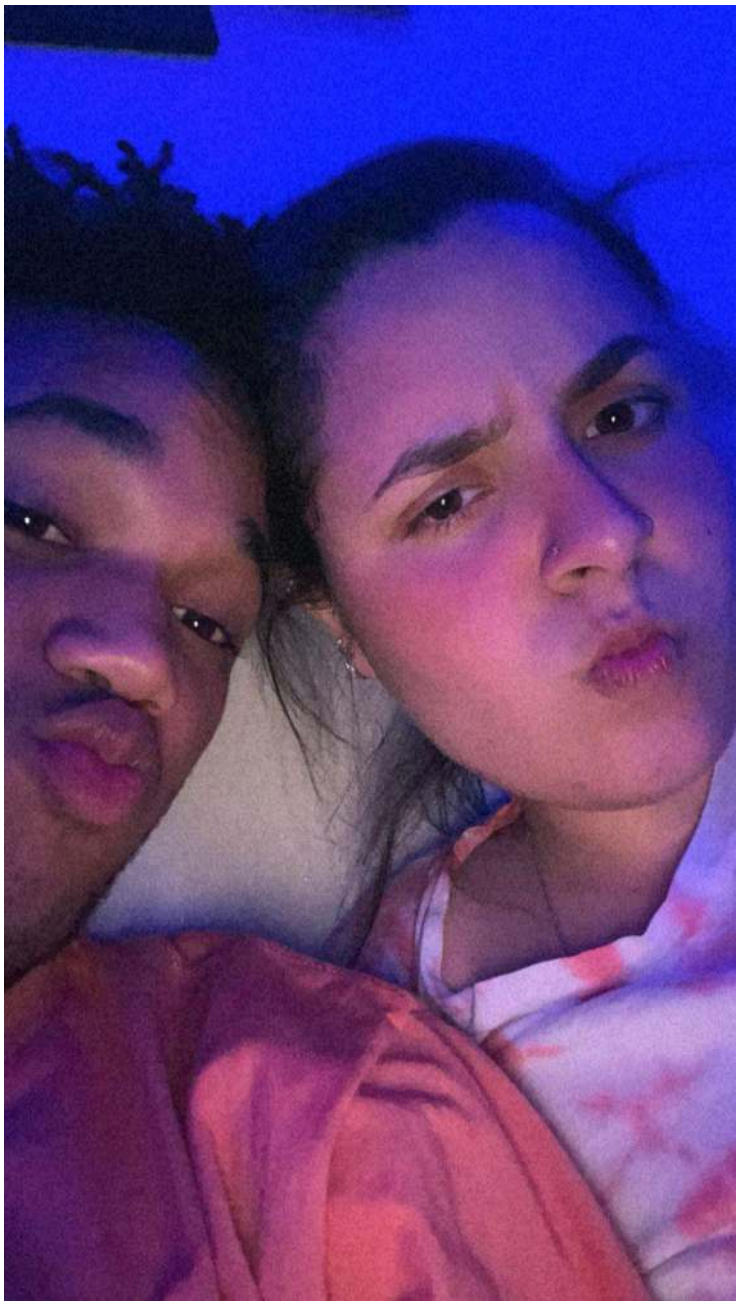
08/26/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva celebrating their anniversaire.



08/06/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva enjoying summer by the lake.



06/19/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at a friend’s birthday party.



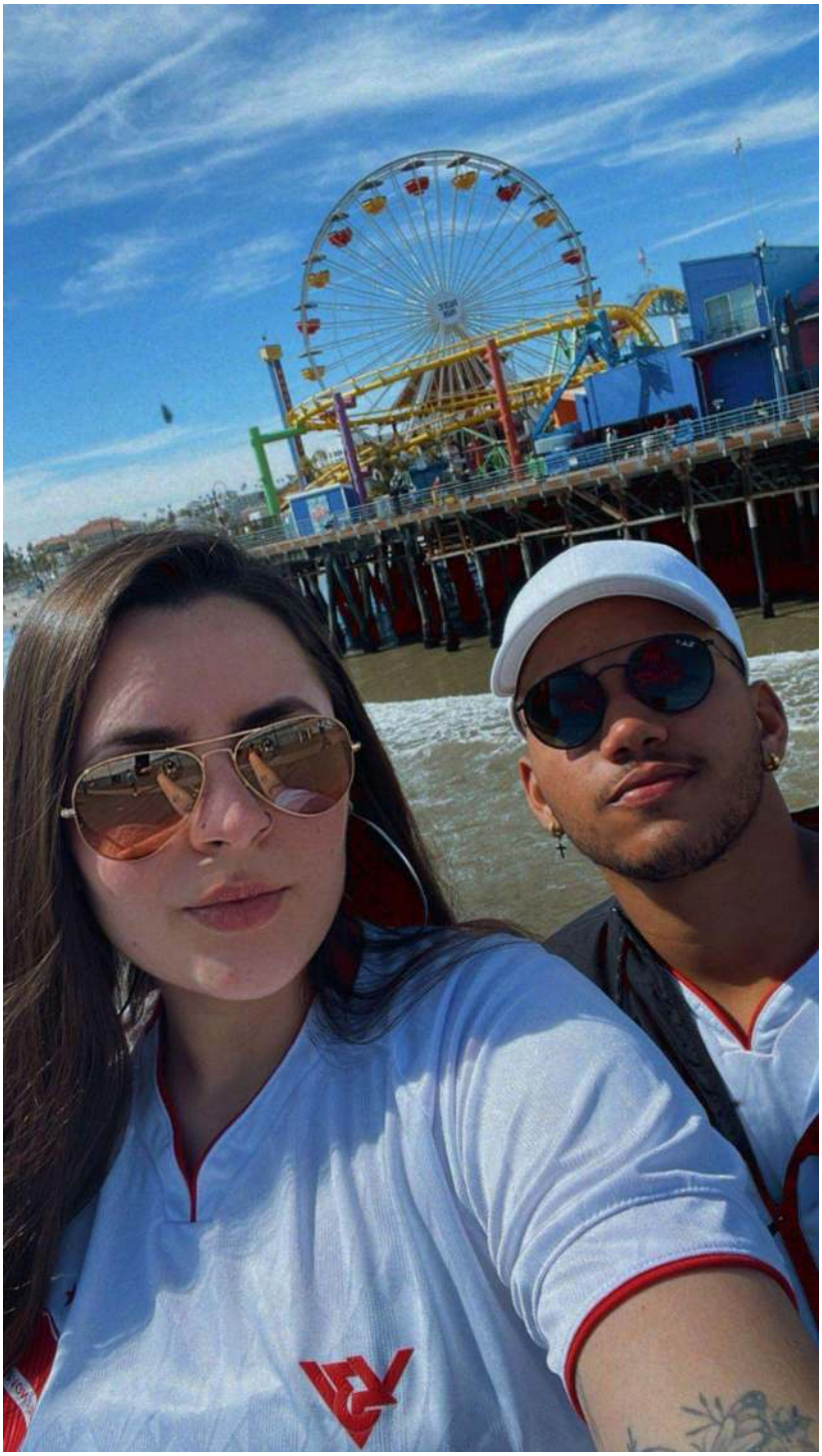
05/26/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva together.



02/28/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at Beverlly Hills sign, Los Angeles, CA.



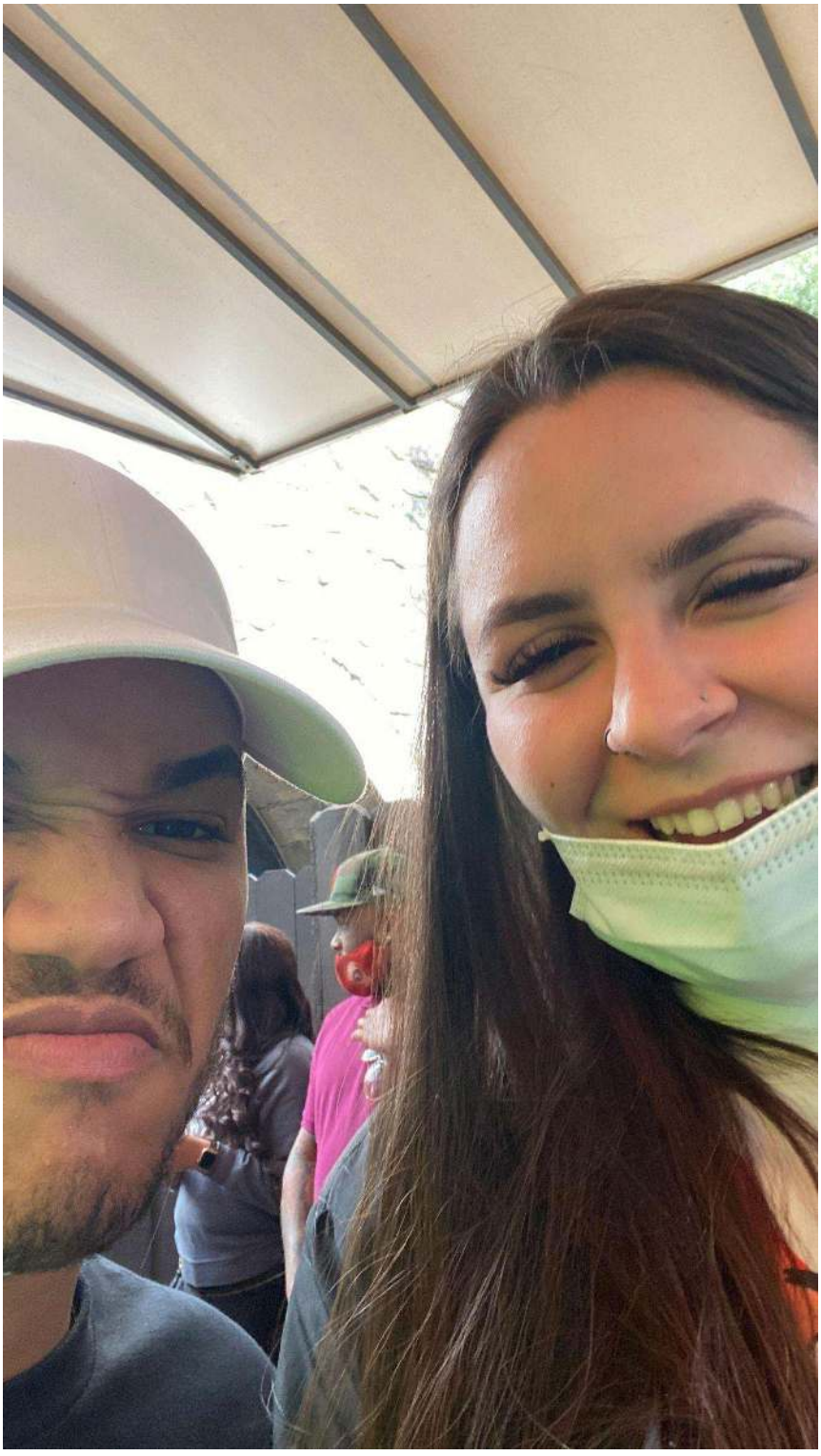
02/28/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at Beverlly Hills sign, Los Angeles, CA.



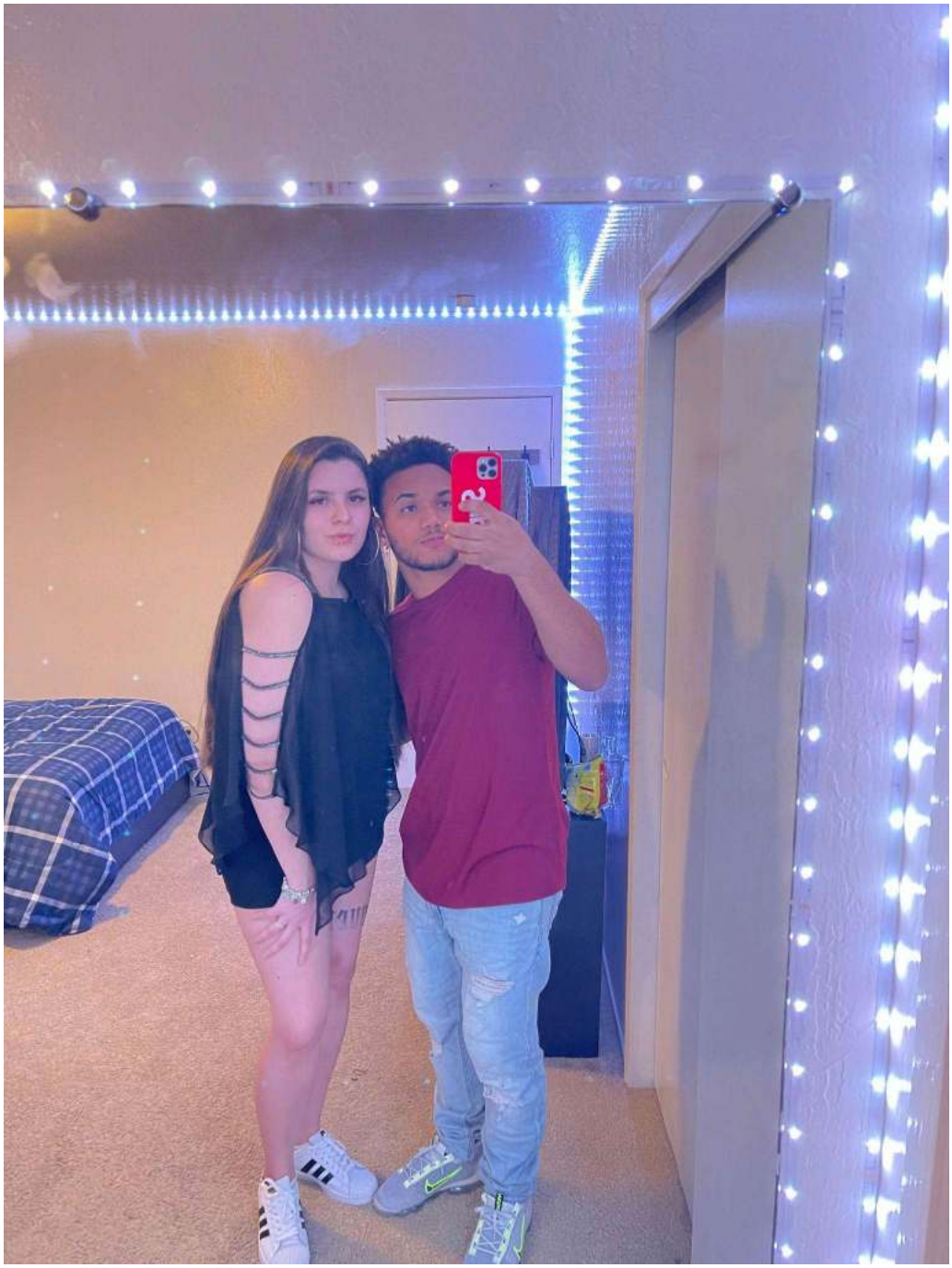
02/28/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at Pier Santa Monica, CA.



02/28/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at Universal Studios.



02/26/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at Universal Studios.



02/19/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at his house for a dinner.



01/15/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at their friends house.



01/15/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at Alcatraz Museum.



01/15/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at Alcatraz Museum.



01/15/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at Alcatraz Museum.



02/14/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva getting ready together.



01/07/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at Lake Tahoe for a friend 's trip.



01/01/2022 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva for New Year’s Eve.



12 /31/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva hanging out.



12/24/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva for christmas.



12/18/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva having breakfast.

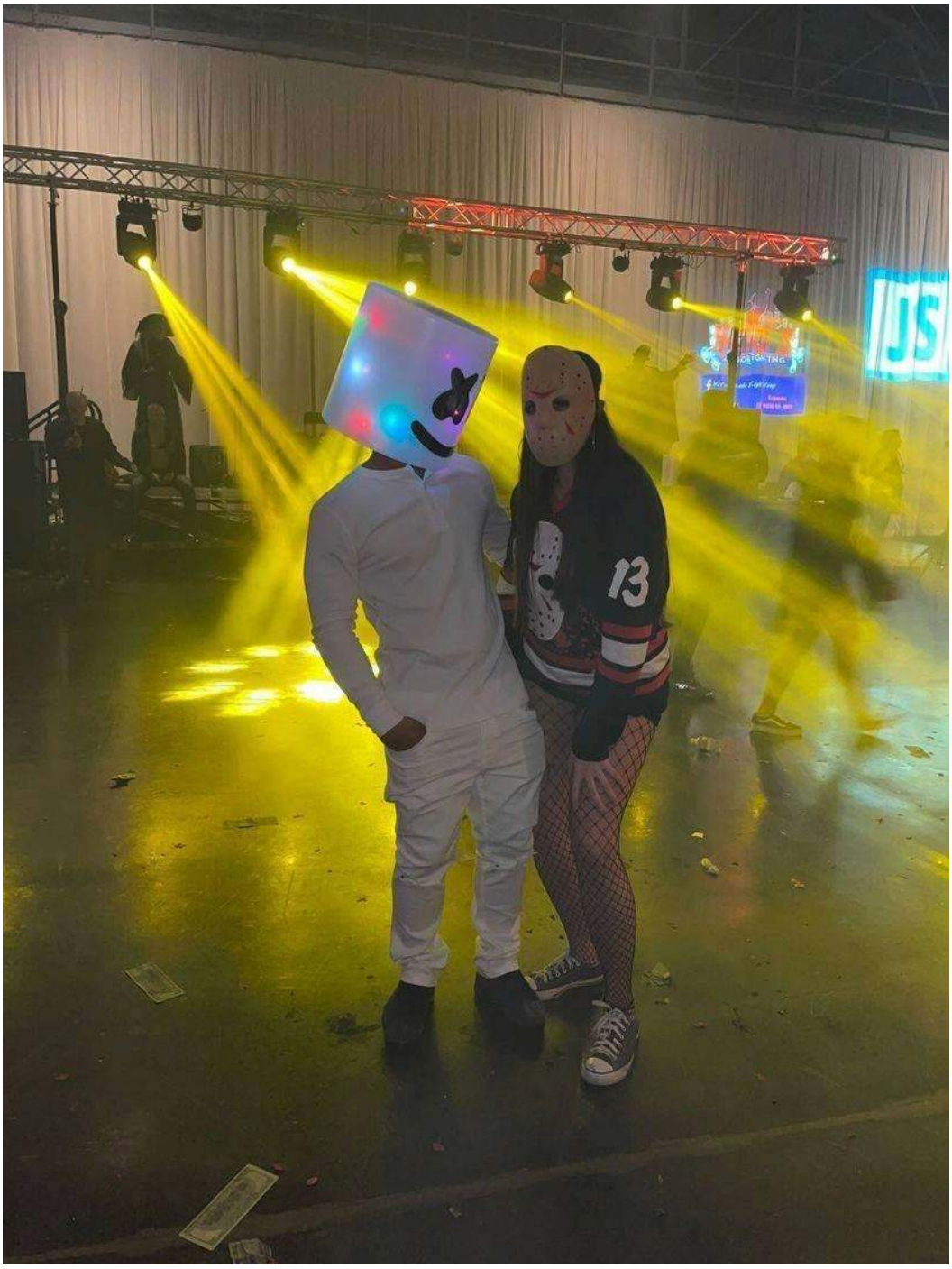


12/11/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva going to her house.





11/25/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva going to a pizza restaurant together.



10/24/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva for a Halloween party.



10/24/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva having lunch at a restaurant..



10/16/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva hanging out.



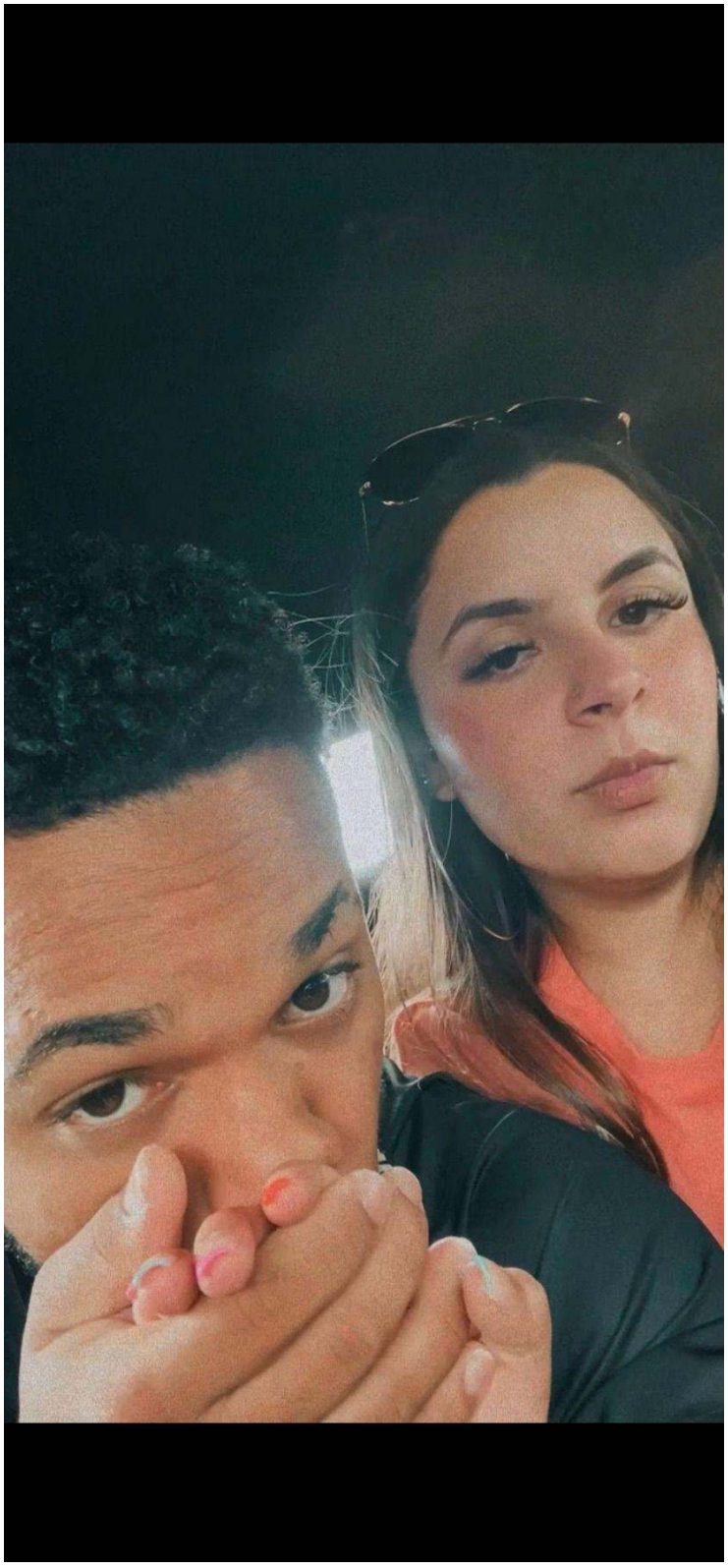
10/02/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva going to her father birthday party.



09/08/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva in Miami for vacation.



09/05/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva on their way to a restaurant.



09/05/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva on their way to a restaurant.



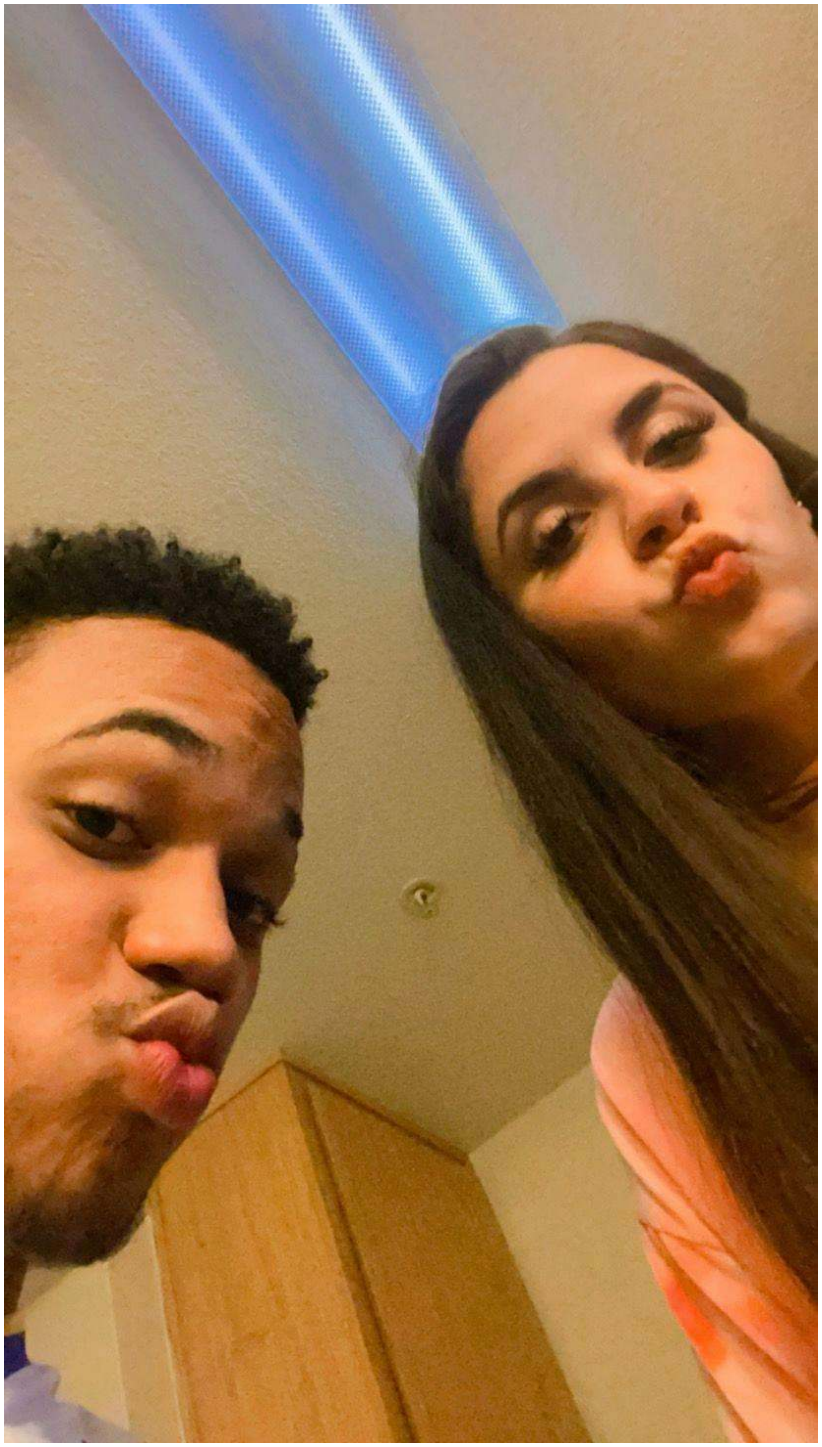
09/05/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva on their way to a restaurant.



08/22/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at their home.



08/01/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva by the pool during a weekend.



08/20/2021 - Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva at their home.



07/24/2021- Sophia Lehnen Rodrigues Miranda and Gleidson Rodrigues da Silva taking their first picture as girlfriend and boyfriend.



Me, Sophia, and my mother, Marileide Fontes. We were celebrating my sister Kauane Cristina's birthday at a Brazilian steakhouse.



Me, Sophia, and Elvisley Souza. We were at a sertanejo (Brazilian country music) party with some friends. He has been my friend since I arrived here.



We were having our son Arthur's baby shower with our friends Rosivandro Alves and Jessyka Adriana and their children.



My family at Arthur's baby shower: my mother, Marileide Fontes; my sister, Kauane Cristina; my brother, Henrique de Freitas; and my cousin, Pamela Ghiotti.



Our son Arthur's baby shower with Sophia's family: my father-in-law Terence Miranda, my mother-in-law Francine Zancanaro, and my sister-in-law Gabriela Miranda.



Arthur's baby shower with my aunt and uncle, Irislan Fontes and Francielly Gonçalves.



Arthur's baby shower with our friends Luiz Gustavo Oliveira and his girlfriend.



Arthur's baby shower, also with our friends Adriano Oliveira,
Juliana Oliveira, Júlia Layssa, and Adriano Filho Oliveira.



Arthur's baby shower with two people who took me in as their own son and whom I also consider my family: Adriano Oliveira and Juliana Oliveira.



Arthur's baby shower with our friends, people who are very dear to Sophia: Mário Neto Queiroz, Maria Luiza, Luiz Gustavo Queiroz, and Luiz Guilherme Queiroz.



Arthur's baby shower. These are also our friends: Júlia Layssa and Adriano Filho Oliveira.



Arthur's baby shower, also with our friends Rocivan Alves and Santiago Neves.



Arthur's baby shower with our friends Hiury Fernandes and Elen Beatriz.



Arthur's baby shower with our friends Elvisley Souza and his wife.



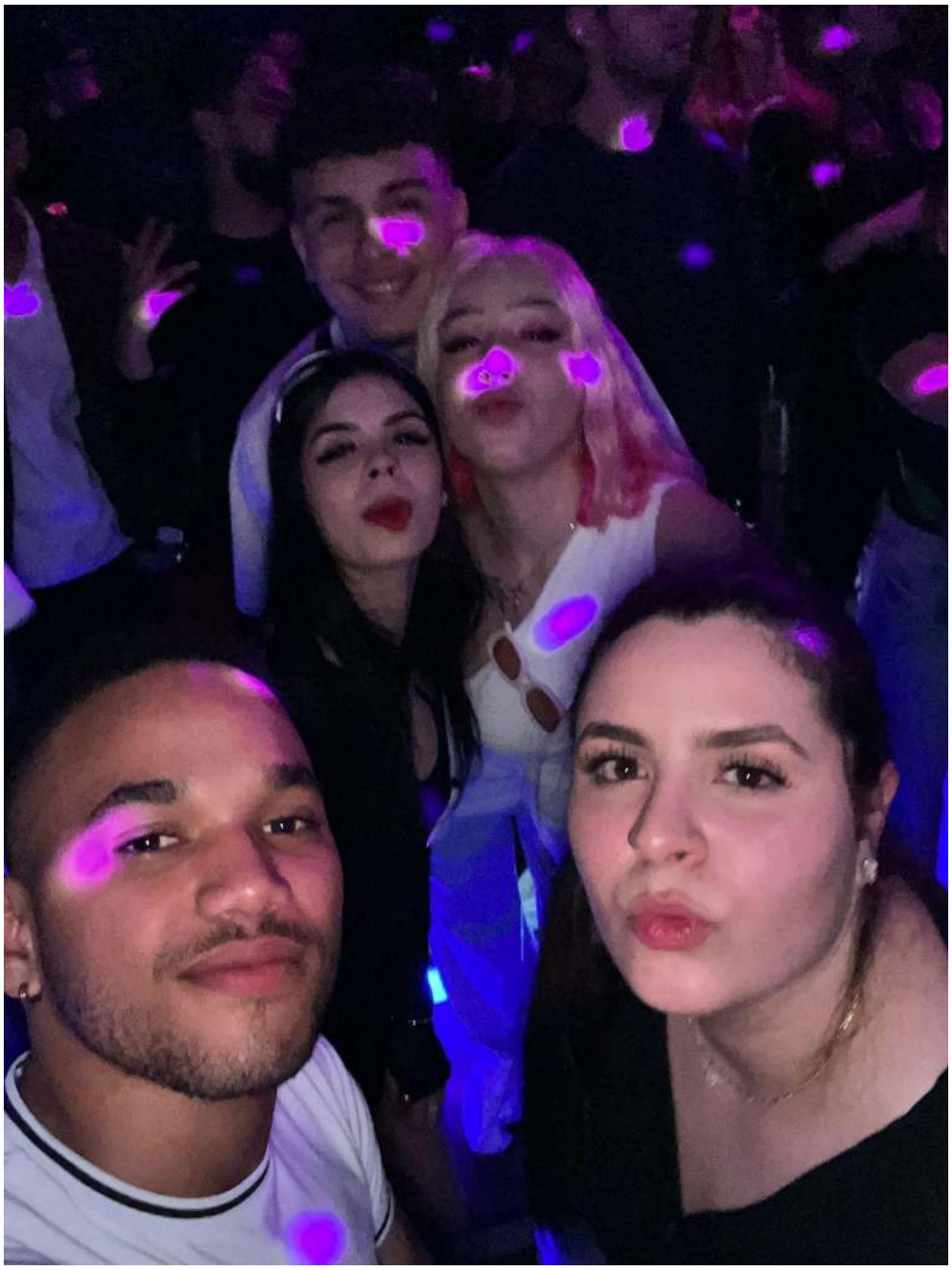
Our wedding day, with our friend Jenni Rose, who officiated our wedding.



Our wedding day, with our friends who have known Sophia since she arrived in the USA 🇺🇸: Mario Neto Queiroz, Maria Luiza, Luiz Gustavo, and Luiz Guilherme.



Our wedding day with my family (my aunt, uncle, and cousins): Irislan Fontes, Francielly Gonçalves, Ana Gabriele, and Luana da Silva.



We were at a party with our friends and Sophia's sister (my sister-in-law): Gabriela Miranda, Eduardo Britis, and Bruna Almeida.



Our wedding day with our friends, people who have known Sophia for a long time: Júnior, Dayse Bittencourt, and Ana Julia.



Our wedding day with our friends, people who have known Sophia since childhood: Luiz Gustavo and Ana Julia Bittencourt.



Our wedding day with my sister-in-law and her boyfriend, Caíque Melia and Gabriela Miranda.



Our wedding day with our friends: my childhood friend Elvisley Souza and his wife.



Our wedding day with our dear friends Mauro de Paula and Beatriz Xavier.



Our wedding day with our friends and the family of the woman who officiated our wedding: Jenni Rose, Cris, and their children.



Our wedding day with our friends: Sophia's longest-standing friend and her boyfriend.

Eduardo Britis and Bruna Almeida



Our wedding day with our dear friend Igor Gabriel, whom I have known for a long time.



Our wedding day with our friends Celeste and Samuel. Celeste worked with Sophia when Sophia was a dental assistant, and her boyfriend, Samuel, was our photographer.



Our wedding day with our friend João Vitor, who has been my friend since I arrived here in the USA 🇺🇸



Our wedding day with my father-in-law and mother-in-law:

Terence Miranda and Francine Zancanaro



Our wedding day with dear friends who have been my friends since I arrived here: Rocivan Alves, Juliana Neves, Santiago Neves, and Higgor Neves.



Our son Arthur's 2nd birthday with my mother-in-law,
Francine Zancanaro, and my sister-in-law, Gabriela Miranda.



Our son Arthur's birthday with Maricela Quijano, Emanuel Quijano, and Isabela Quijano.



Our son Arthur's 2nd birthday with my aunt, uncle, and cousins:
Irislan Fontes, Francielly Gonçalves, Ana Gabriele, and Matheus.



Our son Arthur's birthday with our friends Diego Fernandes and
Sheila Coimbra and their children, Calebe, Lorenzo, and Ana Julia.



Our son Arthur's birthday with Mario Neto, Maria Luiza, Luiz Gustavo, and Luiz Guilherme.



A very special day for us: celebrating another year of life for our little prince.



Arthur's 2nd birthday with our friends Elisama Vieira and
Michel de Assunção and their children, Anthony and Nathan.



Arthur's 2nd birthday with Luana Silva, Ana Julia, and Yasmin Ribeiro.



Ana's birthday. Our friend Ana Julia has known Sophia since she was little.



Family Christmas photo: me (Gleidson Rodrigues), Sophia Miranda, my sister-in-law Gabriela Miranda, my father-in-law Terence Miranda, my mother-in-law Francine Zancanaro, and our son Arthur Rodrigues.





Baby shower of our friends Pastor Gabriel and Franciele.



Arthur's gender reveal, the day we found out we were having a boy, with my mother, Marileide Fontes; my sister, Kauane Cristina; my brother, Henrique de Freitas; my father-in-law, Terence Miranda; Sophia's grandfather, Edison Miranda; my mother-in-law, Francine Zancanaro; and my sister-in-law, Gabriela Miranda.



Our friend Pabline Vieira's birthday.



Birthday of our friends Higgor and Adriano. The one in this photo is Adriano Oliveira.



New Year's party: me (Gleidson Rodrigues), Sophia Miranda, Gabriela Miranda, Terence Miranda, and Francine Zancanaro.



Christmas photo together: me (Gleidson Rodrigues), Sophia Miranda, Gabriela Miranda, Terence Miranda, and Francine Zancanaro.

Exhibit 8 - Gleidson Rodrigues da Silva’s Notice to Appear

U.S. Department of Homeland Security

Notice to Appear

In removal proceedings under section 240 of the Immigration and Nationality Act:

Subject ID:365663706 FINS #:1281454068 File No: A203 758 084

DOB: 09/16/2001 Event No:EPS1906000355

In the Matter of:

Respondent: GLEIDSON SILVA-ANTUNES currently residing at:

375 OXFORD STREET SAN FRANCISCO, CALIFORNIA, UNITED STATES 94134 (415)541-2211

(Number, street, city and ZIP code) (Area code and phone number)

☐ 1. You are an arriving alien.

☒ 2. You are an alien present in the United States who has not been admitted or paroled.

☐ 3. You have been admitted to the United States, but are removable for the reasons stated below.

The Department of Homeland Security alleges that you:

1. You are not a citizen or national of the United States;
2. You are a native of BRAZIL and a citizen of BRAZIL ;
3. You arrived in the United States at or near EL PASO, TX , on or about June 12, 2019 ;
4. You were not then admitted or paroled after inspection by an Immigration Officer.

On the basis of the foregoing, it is charged that you are subject to removal from the United States pursuant to the following provision(s) of law:

1. 212(a)(6)(A)(i) of the Immigration and Nationality Act, as amended, in that you are an alien present in the United States without being admitted or paroled, or who arrived in the United States at any time or place other than as designated by the Attorney General.

☐ This notice is being issued after an asylum officer has found that the respondent has demonstrated a credible fear of persecution or torture.

☐ Section 235(b)(1) order was vacated pursuant to: ☐8CFR 208.30(f)(2) ☐8CFR 235.3(b)(5)(iv)

YOU ARE ORDERED to appear before an immigration judge of the United States Department of Justice at:

100 MONTGOMERY ST., SUITE 800 San Francisco CA US 94104

(Complete Address of Immigration Court, including Room Number, if any)

on a date to be set *(Date)* at a time to be set *(Time)* to show why you should not be removed from the United States based on the charge(s) set forth above.

GERARDO ARROYO PATROL AGENT IN CHARGE (ACTING)

(Signature and Title of Issuing Officer)

Date: June 12, 2019 Las Cruces, New Mexico

(City and State)

See reverse for important information

Form I-862 (Rev. 08/01/07) N

Notice to Respondent

Warning: Any statement you make may be used against you in removal proceedings.

Alien Registration: This copy of the Notice to Appear served upon you is evidence of your alien registration while you are under removal proceedings. You are required to carry it with you at all times.

Representation: If you so choose, you may be represented in this proceeding, at no expense to the Government, by an attorney or other individual authorized and qualified to represent persons before the Executive Office for Immigration Review, pursuant to 8 CFR 3.16. Unless you so request, no hearing will be scheduled earlier than ten days from the date of this notice, to allow you sufficient time to secure counsel. A list of qualified attorneys and organizations who may be available to represent you at no cost will be provided with this notice.

Conduct of the hearing: At the time of your hearing, you should bring with you any affidavits or other documents, which you desire to have considered in connection with your case. If you wish to have the testimony of any witnesses considered, you should arrange to have such witnesses present at the hearing.

At your hearing you will be given the opportunity to admit or deny any or all of the allegations in the Notice to Appear and that you are inadmissible or removable on the charges contained in the Notice to Appear. You will have an opportunity to present evidence on your own behalf, to examine any evidence presented by the Government, to object, on proper legal grounds, to the receipt of evidence and to cross examine any witnesses presented by the Government. At the conclusion of your hearing, you have a right to appeal an adverse decision by the immigration judge.

You will be advised by the immigration judge before whom you appear of any relief from removal for which you may appear eligible including the privilege of departure voluntarily. You will be given a reasonable opportunity to make any such application to the immigration judge.

Failure to appear: You are required to provide the DHS, in writing, with your full mailing address and telephone number. You must notify the Immigration Court immediately by using Form EOIR-33 whenever you change your address or telephone number during the course of this proceeding. You will be provided with a copy of this form. Notices of hearing will be mailed to this address. If you do not submit Form EOIR-33 and do not otherwise provide an address at which you may be reached during proceedings, then the Government shall not be required to provide you with written notice of your hearing. If you fail to attend the hearing at the time and place designated on this notice, or any date and time later directed by the Immigration Court, a removal order may be made by the immigration judge in your absence, and you may be arrested and detained by the DHS.

Mandatory Duty to Surrender for Removal: If you become subject to a final order of removal, you must surrender for removal to one of the offices listed in 8 CFR 241.16(a). Specific addresses on locations for surrender can be obtained from your local DHS office or over the internet at http://www.ice.gov/about/dro/contact.htm. You must surrender within 30 days from the date the order becomes administratively final, unless you obtain an order from a Federal court, immigration court, or the Board of Immigration Appeals staying execution of the removal order. Immigration regulations at 8 CFR 241.1 define when the removal order becomes administratively final. If you are granted voluntary departure and fail to depart the United States as required, fail to post a bond in connection with voluntary departure, or fail to comply with any other condition or term in connection with voluntary departure, you must surrender for removal on the next business day thereafter. If you do not surrender for removal as required, you will be ineligible for all forms of discretionary relief for as long as you remain in the United States and for ten years after departure or removal. This means you will be ineligible for asylum, cancellation of removal, voluntary departure, adjustment of status, change of nonimmigrant status, registry, and related waivers for this period. If you do not surrender for removal as required, you may also be criminally prosecuted under section 243 of the Act.

Request for Prompt Hearing

To expedite a determination in my case, I request an immediate hearing. I waive my right to a 10-day period prior to appearing before an immigration judge.

Before: _____

_____
(Signature of Respondent)

Date: _____

_____
(Signature and Title of Immigration Officer)

Certificate of Service

This Notice To Appear was served on the respondent by me on June 12, 2019, in the following manner and in compliance with section 239(a)(1)(F) of the Act.

- [X] in person
- [ ] by certified mail, returned receipt requested
- [ ] by regular mail
- [ ] Attached is a credible fear worksheet.
- [X] Attached is a list of organizations and attorneys which provide free legal services.

The alien was provided oral notice in the PORTUGUESE language of the time and place of his or her hearing and of the consequences of failure to appear as provided in section 240(b)(7) of the Act.

X _____
(Signature of Respondent if Personally Served)

DAKOTA REYNOLDS Border Patrol Agent
(Signature and Title of officer)