

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000023850

**Entity Name:** DINIZ CORPORACOES LLC

**Current Principal Place of Business:**

2897 POLVADERO LN  
UNIT 108  
ORLANDO, FL 32835

**Current Mailing Address:**

2897 POLVADERO LN  
UNIT 108  
ORLANDO, FL 32835 US

**FEI Number:** 37-1966218

**Certificate of Status Desired:** No

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

NUNES R SOUZA DINIZ, FELIPE  
2897 POLVADERO LN  
UNIT 108  
ORLANDO, FL 32835 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title AMBR  
Name NUNES R SOUZA DINIZ, FELIPE  
Address 2897 POLVADERO LV, UNIT 108  
City-State-Zip: ORLANDO FL 32835

Title AMBR  
Name NUNES R SOUZA DINIZ, DIOGO  
Address 2897 POLVADERO LN, UNIT 108  
City-State-Zip: ORLANDO FL 32835

Title AMBR  
Name NUNES R SOUSA DINIZ, VINICIUS  
Address 2897 POLVADERO LN, UNIT 108  
City-State-Zip: ORLANDO FL 32835

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** FELIPE NUNES R SOUZA DINIZ

**MGR**

**04/30/2023**

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

\_\_\_\_\_  
Date