# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L20000346448

Entity Name: IFLIGHT BUSINESS CLASS LLC

# **Current Principal Place of Business:**

6735 CONROY ROAD STE 309 ORLANDO, FL 32835

# **Current Mailing Address:**

6735 CONROY ROAD STE 309 ORLANDO, FL 32835 US

## FEI Number: 85-3918552

## Name and Address of Current Registered Agent:

ICONNECT SOLUTIONS CORP 6735 CONROY ROAD STE 309 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

# Authorized Person(s) Detail :

	Title	MGR	Title	AMBR
	Name	SOARES LESSA, EDMAR	Name	CARDOSO V DA SILVA, PHELLIPE
	Address	5312 BUFFALO SPEEDWAY	Address	RUA JOSE DE BRITO 77
	City-State-Zip:	HOUSTON TX 77005	City-State-Zip:	RIO DE JANEIRO RJ 22640-100
	Title	MGR	Title	AMBR
		MGR	The	, and t
	Name	BORGES R MARICEVICH, MARCO	Name	ORNELLAS RAMOS, NATILA CLICELE
			Name	ORNELLAS RAMOS, NATILA CLICELE
		BORGES R MARICEVICH, MARCO		
	Name	BORGES R MARICEVICH, MARCO ANDRE	Name	ORNELLAS RAMOS, NATILA CLICELE AV. DOS FLAMBOYANTS 100 BLOCO

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.

MGR

### SIGNATURE: EDMAR SOARES LESSA

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Mar 12, 2024 Secretary of State 9806840146CC

Certificate of Status Desired: No

Date

03/12/2024

Date