# that my name appears above, or on an attachment with all other like empowered. SIGNATURE: OBEDE BESSA ROCHA DA SILVA AMBR

<u>2023</u>	FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT	

#### DOCUMENT# L21000044077

## Entity Name: BESSA SOLUTIONS LLC

#### Current Principal Place of Business:

2774 EAST COLONIAL DRIVE #1205 ORLANDO, FL 32803

## **Current Mailing Address:**

2774 EAST COLONIAL DRIVE #1205 ORLANDO, FL 32803 US

#### FEI Number: 36-4981433

# 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	EMERSON CORREA			02/22/2023		
	Electronic Signature of Registered Agent			Date		
Authorized Person(s) Detail :						
Title	AMBR	Title	AMBR			
Name	BESSA ROCHA DA SILVA, OBEDE	Name	ESTEVES DE LIMA, THAYLA			
Address	2774 EAST COLONIAL DRIVE #1205	Address	2774 EAST COLONIAL DRIVE #1205			
City-State-Zip:	ORLANDO FL 32803	City-State-Zip:	ORLANDO FL 32803			

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

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 22, 2023 Secretary of State 2237601150CC

Certificate of Status Desired: No

02/22/2023 Date