

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000219441

**FILED**  
**Feb 27, 2024**  
**Secretary of State**  
**2142200914CC**

**Entity Name:** BAHIA VENTURES LLC

**Current Principal Place of Business:**

1000 BRICKELL AVE  
STE 715 PMB 5108  
MIAMI, FL 33131

**Current Mailing Address:**

1000 BRICKELL AVE  
STE 715 PMB 5108  
MIAMI, FL 33131 US

**FEI Number:** 86-3897346

**Certificate of Status Desired:** No

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

SENRA MESQUITA, NICOLLE  
1200 BRICKELL BAY DR  
3421  
MIAMI, FL 33131 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 MGR  
Name CONTRERAS CARIBE, VICTOR  
Address 1000 BRICKELL AVE SUITE 715 PMB  
5108  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name LOPES NECTOUX, NELSON  
Address 1648 GRAND AVENUE  
City-State-Zip: SAN DIEGO CA 92109

Title MGR  
Name ARAGON, HENRIQUE  
Address RUA EWERTON VISCO, 160,  
AP 1110  
City-State-Zip: SALVADOR BAHIA 41820-022

*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:** VICTOR CONTRERAS CARIBE

MRG

02/27/2024

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

\_\_\_\_\_  
Date