# SIGNATURE: GEORGE HELMSTETTER

Electronic Signature of Signing Authorized Person(s) Detail

### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# DOCUMENT# L22000021353

Entity Name: MCID PARCEL 11 LLC

#### **Current Principal Place of Business:**

6161 NE 3RD AVE SUITE 3 MIAMI, FL 33137

#### **Current Mailing Address:**

6161 NE 3RD AVE SUITE 3 MIAMI, FL 33137 UN

#### FEI Number: 87-4261014

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

HELMSTETTER, GEORGE L 6161 NE 3RD AVE SUITE 3 MIAMI, FL 33137 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 :
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/ (411011204			
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	FAIRMAN, NEIL	Name	BURNS, ANTHONY J
Address	6161 NE 3RD AVE SUITE 3	Address	6161 NE 3RD AVE SUITE 3
City-State-Zip:	MIAMI FL 33137	City-State-Zip:	MIAMI 33137
Title	AUTHORIZED MEMBER	Title	AR
Name	HELMSTETTER, GEORGE L	Name	HELMSTETTER, GEORGE L
SUITE 3	6161 NE 3RD AVE	Address	6161 NE 3RD AVE, SUITE 3
		City-State-Zip:	MIAMI FL 33137
City-State-Zip:	MIAMI 33137		
Title	AR	Title	AR
Name	BURNS, ANTHONY J	Name	FAIRMAN, NEIL
Address		Address	6161 NE 3RD AVE, SUITE 3
	6161 NE 3RD AVE, SUITE 3	City-State-Zip:	MIAMI FL 33137
City-State-Zip:	MIAMI FL 33137		

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.

MANAGER

Date

## FILED Apr 25, 2024 Secretary of State 2585673039CC

Certificate of Status Desired: Yes

Date

04/25/2024