

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000124356

**Entity Name:** ALICIA MORRIS LLC

**Current Principal Place of Business:**

4700 MILLENIA BOULEVARD  
SUITE 175  
ORLANDO, FL 32839

**Current Mailing Address:**

4700 MILLENIA BOULEVARD  
SUITE 175  
ORLANDO, FL 32839

**FEI Number:** 88-1139620

**Certificate of Status Desired:** Yes

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

ALICIA, MORRIS B  
2140 W. OAK RIDGE RD.  
APT. C  
ORLANDO, FL 32809 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 ALICIA, MORRIS B  
Address 4700 MILLENIA BLVD. SUITE 175  
City-State-Zip: ORLANDO FL 32839

Title ASST  
Name SEYMONE, DONALDSON B  
Address 4700 MILLENIA BLVD. SUITE 175  
City-State-Zip: ORLANDO FL 32839

*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:** ALICIA MORRIS

**OWNER/MANAGER**

**01/31/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date