

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000051677

**Entity Name:** AICO INDUSTRIAL LLC

**Current Principal Place of Business:**

14229 FALLS CHURCH DR  
APT 1701  
ORLANDO, FL 32837

**Current Mailing Address:**

14229 FALLS CHURCH DR  
APT 1701  
ORLANDO, FL 32837 US

**FEI Number:** 92-2163367

**Certificate of Status Desired:** No

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

LOPEZ, CARLOS A  
14229 FALLS CHURCH DR  
APT 1701  
ORLANDO, FL 32837 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 LOPEZ RAMIREZ, CARLOS ANTONIO  
Address 14229 FALLS CHURCH DR  
City-State-Zip: ORLANDO FL 32837

Title MGR  
Name LOPEZ ROJAS, JUAN CARLOS  
Address 14229 FALLS CHURCH DR  
City-State-Zip: ORLANDO FL 32837

Title MGR  
Name RAMIREZ MORENO, MIRIAM EMILSE  
Address 14229 FALLS CHURCH DR  
City-State-Zip: ORLANDO FL 32837

Title MGR  
Name LOPEZ RAMIREZ, KARLA NAZARETH  
Address 14229 FALLS CHURCH DR  
City-State-Zip: ORLANDO FL 32837

Title MGR  
Name RAMIREZ APOLINAR, YOFRAN E  
Address 14229 FALLS CHURCH DR  
City-State-Zip: ORLANDO FL 32837

*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:** LOPEZ RAMIREZ CARLOS ANTONIO

MGR

04/30/2024

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

\_\_\_\_\_  
Date