

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000345202

**Entity Name:** VIDA PAVERS LLC

**Current Principal Place of Business:**

3512 SPRINGFIELD DRIVE  
HOLIDAY, FL 34691

**Current Mailing Address:**

3512 SPRINGFIELD DRIVE  
HOLIDAY, FL 34691 US

**FEI Number:** 32-0646093

**Certificate of Status Desired:** No

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

BARBOSA LEITE, IGOR  
3512 SPRINGFIELD DRIVE  
HOLIDAY, FL 34691 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            AUTHORIZED MEMBER  
Name            BARBOSA LEITE, IGOR  
Address         3512 SPRINGFIELD DRIVE  
City-State-Zip: HOLIDAY FL 34691

*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:** IGOR BARBOSA LEITE

**AUTHORIZED MEMBER**

**04/03/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date