

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000273398

**Entity Name:** AMARAL TRANSPORTS LLC

**Current Principal Place of Business:**

6466 CAVA ALTA DR  
APT 401  
ORLANDO, FL 32835

**Current Mailing Address:**

6466 CAVA ALTA DR  
APT 401  
ORLANDO, FL 32835 US

**FEI Number:** 87-1163653

**Certificate of Status Desired:** No

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

DIAS, MIKE N  
6466 CAVA ALTA DR  
APT 401  
ORLANDO, FL 32835 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 DIAS, MIKE N  
Address 6466 CAVA ALTA DR APT 401  
City-State-Zip: ORLANDO FL 32835

Title AMBR  
Name BORGES AMARAL, ANDREA  
Address 6466 CAVA ALTA DR APT 401  
City-State-Zip: ORLANDO FL 32835

*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:** ANDREA BORGES AMARAL

MGR

05/01/2022

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

\_\_\_\_\_  
Date