

**2023 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

**Certificate of Status Desired:** No

**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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name THE PLAZA GROUP LIMITED CORPORATION  
Address 6161 NE 3RD AVE, SUITE 3  
City-State-Zip: MIAMI FL 33137

Title AUTHORIZED MEMBER  
Name FAIRMAN, NEIL  
Address 6161 NE 3RD AVE SUITE 3  
City-State-Zip: MIAMI FL 33137

Title AUTHORIZED MEMBER  
Name BURNS, ANTHONY J  
Address 6161 NE 3RD AVE SUITE 3  
City-State-Zip: MIAMI 33137

Title AUTHORIZED MEMBER  
Name HELMSTETTER, GEORGE L  
Address 6161 NE 3RD AVE SUITE 3  
City-State-Zip: MIAMI 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.*

**SIGNATURE:** NEIL FAIRMAN

**AUTHORIZED MEMBER**

**01/11/2023**

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

\_\_\_\_\_  
Date