

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000052570

**Entity Name:** FCIR ENTERPRISE LLC

**Current Principal Place of Business:**

480 N ORANGE AVE  
AP 535  
ORLANDO, FL 32801

**Current Mailing Address:**

480 N ORANGE AVE  
AP 535  
ORLANDO, FL 32801 US

**FEI Number:** 88-0642762

**Certificate of Status Desired:** No

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

AVILA RESENDE, INGRID  
480 N ORANGE AVE  
AP 535  
ORLANDO, FL 32801 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	AMBR	Title	AMBR
Name	AVILA RESENDE, INGRID	Name	CATAO C DE OLIVEIRA, FELIPE
Address	480 N ORANGE AVE AP 535	Address	480 N ORANGE AVE AP 535
City-State-Zip:	ORLANDO FL 32801	City-State-Zip:	ORLANDO FL 32801

*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:** INGRID AVILA RESENDE

AMBR

01/26/2023

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

\_\_\_\_\_  
Date