

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000220529

**Entity Name:** CINCONETOS, LLC

**Current Principal Place of Business:**

2964 LUCAYAN HARBOUR CIR  
7-104  
KISSIMMEE, FL 34746

**Current Mailing Address:**

2964 LUCAYAN HARBOUR CIR  
7-104  
KISSIMMEE, FL 34746 US

**FEI Number:** 38-4227850

**Certificate of Status Desired:** No

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

LEGIT CONSULTING SERVICES, LLC  
6735 CONROY WINDERMERE RD  
STE 233  
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 AMBR  
Name PRESTES, MERLINO JR  
Address RUA FRANCISCO ROCHA, 1435 APT 51  
City-State-Zip: CURITIBA PR 80730--390

Title AMBR  
Name CAMPELO PRESTES, ANA LUCIA  
Address RUA FRANCISCO ROCHA, 1435 APT 51  
City-State-Zip: CURITIBA PR 80730--390

Title AMBR  
Name CAMPELO PRESTES, JULIANO  
Address RUA FRANCISCO ROCHA, 1435 APT 51  
City-State-Zip: CURITIBA PR 80730--390

Title AMBR  
Name CAMPELO PRESTES, LUCIANO  
Address RUA VISCONDE DE GUARAPUAVA, 4639, APT 03  
City-State-Zip: CURITIBA PR 80240--010

Title AMBR  
Name CAMPELO PRESTES, ANA CAROLINA  
Address RUA ARNALDO MOURA, 68 CASA 2  
City-State-Zip: CURITIBA PR 81210-242

*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:** MERLINO PRESTES JR

AMBR

04/07/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date