

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000335108

**Entity Name:** LOIRE VENTURES LLC

**Current Principal Place of Business:**

2050 CORAL WAY  
SUITE 405  
MIAMI, FL 33145

**Current Mailing Address:**

2050 CORAL WAY  
SUITE 405  
MIAMI, FL 33145 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

FA CORPORATE MANAGEMENT LLC  
2050 CORAL WAY  
SUITE 405  
MIAMI, FL 33145 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 RESTREPO, BEATRIZ E  
Address 145 MADEIRA AVE  
SUITE 209  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name MUNOZ, CLAUDIA SOFIA  
Address 2050 CORAL WAY  
SUITE 405  
City-State-Zip: MIAMI FL 33145

*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:** CLAUDIA MUNOZ

MGR

08/03/2023

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

\_\_\_\_\_  
Date