# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000366299

Entity Name: ICONIPLEX, LLC

## **Current Principal Place of Business:**

5764 N ORANGE BLOSSOM TRL PMB 96055 ORLANDO, FL 32810

# **Current Mailing Address:**

5764 N ORANGE BLOSSOM TRL PMB 96055 ORLANDO, FL 32810 US

## FEI Number: 88-3848550

### Name and Address of Current Registered Agent:

GOLDEN, PATRICK D 5764 N ORANGE BLOSSOM TRL PMB 96055 ORLANDO, FL 32810 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

### Authorized Person(s) Detail :

 
 Title
 MGR

 Name
 GOLDEN, PATRICK D

 Address
 5764 N ORANGE BLOSSOM TRL PMB 96055

 City-State-Zip:
 ORLANDO FL 32810

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.

MANAGER

SIGNATURE: PATRICK D GOLDEN

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

04/24/2024