

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000493884

**Entity Name:** HIDROLIGHT LLC

**Current Principal Place of Business:**

15655 CITRUS HARVEST RD  
ST 438  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

15655 CITRUS HARVEST RD  
ST 438  
WINTER GARDEN, FL 34787 US

**FEI Number:** 92-1155379

**Certificate of Status Desired:** No

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

SELLERSFLOW LLC  
15655 CITRUS HARVEST RD  
WINTER GARDEN, FL 34787 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 HIDROLIGHT DO BRASIL SA  
Address RODOVIA DOS ACORES 1150,  
AMBROSIO GAROPABA  
City-State-Zip: GAROPABA SC 88495-000

Title MGR  
Name BORGES, RAFAEL  
Address 15655 CITRUS HARVEST RD, ST 438  
City-State-Zip: WINTER GARDEN FL 34787

Title MANAGER  
Name BORGES MARTINS, CAMILA  
Address 15655 CITRUS HARVEST RD  
ST 438  
City-State-Zip: WINTER GARDEN FL 34787

*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:** RAFAEL BORGES

**MANAGER**

**04/28/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date