#### 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0200008385

Entity Name: 123, L.L.C.

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

1250 RENE-LEVESQUE BLVD WEST **SUITE 4100** MONTREAL, QC H3B4W8

## **Current Mailing Address:**

C/O FISHMAN FLANZ MELAND ATTN: CORP DEPT 1250 RENE-LEVESQUE BLVD WEST SUITE 4100 MONTREAL, QC H3B4W8 CA

## FEI Number: 61-1598912

## Name and Address of Current Registered Agent:

LYNCH, FRANCIS X.J. ESQ. 605 NORTH OLIVE AVENUE, 2ND FLOOR WEST PALM BEACH, FL 33401 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	PRESIDENT DIRECTOR	Title	SECRETARY DIRECTOR
Name	PENCER, GARY	Name	PENCER, MAX
Address	530 AV. ARGYLE	Address	21 MILLBANK AVENUE
City-State-Zip:	WESTMOUNT QC H3Y3B7	City-State-Zip:	TORONTO ON M5P1S4
Title	TREASURER DIRECTOR		
Name	PENCER, RICHARD		
Address	10 RIDGEWOOD ROAD		
City-State-Zip:	TORONTO ON M5P 1T5		

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: GARY PENCER

PRESIDENT

03/02/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Mar 02, 2023 Secretary of State 6369292722CC

Certificate of Status Desired: No

Date