

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000035188

**Entity Name:** EL-AD SUNRISE LLC**Current Principal Place of Business:**150 E. PALMETTO PARK ROAD  
SUITE 400  
BOCA RATON, FL 33432**Current Mailing Address:**150 E. PALMETTO PARK ROAD  
SUITE 400  
BOCA RATON, FL 33432 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 AUTHORIZED MEMBER  
Name EL-AD NATIONAL 2016 LLC  
Address 150 E. PALMETTO PARK ROAD  
SUITE 400  
City-State-Zip: BOCA RATON FL 33432

Title MGR, MANAGER  
Name DANIELL, ORLY  
Address 575 MADISON AVE  
22 ND FLOOR  
City-State-Zip: NEW YORK NY 10022

Title MANAGER, CEO  
Name ZIV, NOAM  
Address 150 E. PALMETTO PARK ROAD  
SUITE 400  
City-State-Zip: BOCA RATON FL 33432

Title MANAGER, CFO  
Name BRONFMAN, ARIK  
Address 150 E. PALMETTO PARK ROAD  
SUITE 400  
City-State-Zip: BOCA RATON FL 33432

Title SECRETARY  
Name HON, ARAVA MOHAR  
Address 150 E. PALMETTO PARK ROAD  
SUITE 400  
City-State-Zip: BOCA RATON FL 33432

*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:** ARAVA MOHAR HON

SEC

03/07/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date