

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000045060

Entity Name: RIPB LLC**Current Principal Place of Business:**3889 MAPLE AVE
STE 220
DALLAS, TX 75219**Current Mailing Address:**3889 MAPLE AVE
STE 220
DALLAS, TX 75219 US**FEI Number:** 26-2552340**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**METZ, JOHN
1280 OLD CONGRESS AVE.
SUITE 107
WEST PALM BEACH, FL 33409 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:** JOHN METZ

07/11/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :Title MGR
Name SPI HOSPITALITY, LLC
Address 3889 MAPLE AVE
STE 220
City-State-Zip: DALLAS TX 75219Title AMBR
Name SQUIRES, RICHARD
Address 3889 MAPLE AVE
STE 220
City-State-Zip: DALLAS TX 75219Title AMBR
Name METZ, JOHN
Address 1800 OLD OKEECHOBEE RD SUITE
100
City-State-Zip: WEST PALM BEACH FL 33409Title MGR
Name MORSE, TYLER
Address 152 W 57TH STREET 46TH FLOOR
City-State-Zip: NEW YORK NY 10019Title AMBR
Name MCR FLL LLC
Address 152 W 57TH ST 46TH FL
City-State-Zip: NEW YORK NY 10019

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: RICHARD SQUIRES

MANAGER

07/11/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date