

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000040078

**Entity Name:** KESWICK VILLAGE HOLDINGS LLC

**Current Principal Place of Business:**

1325 AVENUE OF AMERICAS, 28TH FLOOR  
NEW YORK, NY 10019

**Current Mailing Address:**

1325 AVENUE OF AMERICAS, 28TH FLOOR  
NEW YORK, NY 10019 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            CEO  
Name            HERA, ISSAC  
Address        1325 AVENUE OF AMERICAS, 28TH  
                  FLOOR  
City-State-Zip: NEW YORK NY 10019

Title            MEMBER  
Name            ENP KESWICK VILLAGE MEMBER LLC  
Address        1325 AVENUE OF AMERICAS, 28TH  
                  FLOOR  
City-State-Zip: NEW YORK NY 10019

Title            MEMBER  
Name            RYM INTERNATIONAL INVESTMENTS  
                  LLC  
Address        1000 S. PINE ISLAND ROAD , SUITE #  
                  450  
City-State-Zip: PLANTATION FL 33324

Title            SECRETARY  
Name            HERZEK, JACOB  
Address        1325 AVENUE OF AMERICAS, 28TH  
                  FLOOR  
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:** JACOB HERZEK

**SECRETARY**

**04/27/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date