2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000024056

Entity Name: STUMPHAUZER KOLAYA NADLER & SLOMAN, PLLC

FILED Feb 14, 2024 **Secretary of State** 9540236426CC

Current Principal Place of Business:

2 SOUTH BISCAYNE BLVD **SUITE 1600** MIAMI, FL 33131

Current Mailing Address:

2 SOUTH BISCAYNE BLVD **SUITE 1600** MIAMI, FL 33131 US

FEI Number: 27-5029927 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STUMPHAUZER, RYAN 2 SOUTH BISCAYNE BLVD **SUITE 1600** MIAMI, FL 33131 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:

Date

Authorized Person(s) Detail:

Title OFFICE MANAGER Title **MBR**

Electronic Signature of Registered Agent

GONZALEZ, JENNY Name Name STUMPHAUZER, RYAN

2 SOUTH BISCAYNE BLVD 2 SOUTH BISCAYNE BLVD Address Address **SUITE 1600 SUITE 1600**

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title **MBR** Title MBR

Name SLOMAN, JEFFREY Name KOLAYA, TIMOTHY A

2 SOUTH BISCAYNE BLVD 2 SOUTH BISCAYNE BLVD Address Address

SUITE 1600 SUITE 1600 MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title MBR

City-State-Zip:

NADLER, MICHAEL B. Name

2 SOUTH BISCAYNE BLVD Address

SUITE 1600

City-State-Zip: MIAMI FL 33131

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: JENNY GONZALEZ

OFFICE MANAGER

02/14/2024