

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000014070

Entity Name: CNB RE2 HOLDINGS, LLC**Current Principal Place of Business:**100 SE 2ND STREET, 19TH FLOOR
MIAMI, FL 33131**Current Mailing Address:**100 SE 2ND STREET, 19TH FLOOR
MIAMI, FL 33131 US**FEI Number:** 90-0798542**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CARBALLO, MARIO
ATTN: LEGAL DEPARTMENT
100 SE 2ND STREET, 16TH FLOOR
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:** MARIO CARBALLO

03/06/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	GM	Title	GMS
Name	GONZALEZ, JORGE	Name	KANE, MCHENRY
Address	C/O CITY NATIONAL BANK OF FLORIDA 100 SE 2ND STREET, 19TH FLOOR	Address	C/O CITY NATIONAL BANK OF FLORIDA 100 SE 2ND STREET, 19TH FLOOR
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	GMS	Title	GM
Name	CARBALLO, MARIO	Name	JAIME, MARITZA
Address	C/O CITY NATIONAL BANK OF FLORIDA 100 SE 2ND STREET, 19TH FLOOR	Address	C/O CITY NATIONAL BANK OF FLORIDA 100 SE 2ND STREET, 19TH FLOOR
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	GM		
Name	MORAN, LUIS		
Address	C/O CITY NATIONAL BANK OF FLORIDA 100 SE 2ND STREET, 19TH FLOOR		
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: MARIO CARBALLO

GMS

03/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date