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: GARY RESSLER MG

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L12000040352 Entity Name: DUPONT VENUE, LLC

Current Principal Place of Business:

169 E FLAGLER ST PENTHOUSE MIAMI, FL 33131

Current Mailing Address:

169 E FLAGLER ST PENTHOUSE MIAMI, FL 33131 US

FEI Number: 45-4914119

Name and Address of Current Registered Agent:

HARRIS, ELLIOTT 111 SW 3RD ST 6TH FLOOR MIAMI, FL 33130 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

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Authorized Person(s) Detail :

Title	MG	Title	MG
Name	RESSLER, GARY	Name	BENHAMRON, URI
Address	169 E FLAGLER ST PENTHOUSE	Address	169 E FLAGLER ST PENTHOUSE
City-State-Zip	5: MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

FILED Feb 28, 2023 Secretary of State 2449379606CC

Certificate of Status Desired: No

02/28/2023

Date