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: SOFIA SHOYKHET

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L13000059569 Entity Name: 677 NE 24TH STREET #606, LLC

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

1749 NE MIAMI COURT #309 MIAMI, FL 33132

Current Mailing Address:

1749 NE MIAMI COURT #309 MIAMI, FL 33132

FEI Number: 46-2732588

Name and Address of Current Registered Agent:

SHOYKHET, MICHAEL 1749 NE MIÁMI COURT #309 MIA

SIC

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Title	MGRM	Title	MGRM	
Name	SHOYKHET, SOFIA	Name	SHOYKHET, ALEX	
Address	2122 E 8TH STREET	Address	2122 E 8TH STREET	
City-State-Zip:	BROOKLYN NY 11223	City-State-Zip:	BROOKLYN NY 11223	

IAMI, FL 33	132 US			
ne above nam IGNATUR	ed entity submits this statement for the purpose of RE:	f changing its registered office or r	egistered agent, or both, in th	e State of Flor
	Electronic Signature of Registered Age	ent		
uthorized	l Person(s) Detail :			
tle	MGRM	Title	MGRM	

MANAGER

Certificate of Status Desired: No

02/05/2018 Date

Date