

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000103490

Entity Name: CL 2902, LLC**Current Principal Place of Business:**175 SW 7TH ST.
SUITE 1515
MIAMI, FL 33130**Current Mailing Address:**175 SW 7TH ST.
SUITE 1515
MIAMI, FL 33130 US**FEI Number:** 30-0834809**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ECCO PLANET CORP.
175 SW 7TH ST.
SUITE 1515
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

Date

Authorized Person(s) Detail :

| | |
|-----------------|----------------------------|
| Title | MANAGER |
| Name | MOSCARDI, CELSO |
| Address | 16001 COLLINS AVE. 2902 |
| City-State-Zip: | SUNNY ISLES BEACH FL 33160 |

| | |
|-----------------|----------------------------|
| Title | MANAGER |
| Name | MOSCARDI, MARIA LUCIA F |
| Address | 16001 COLLINS AVE 2902 |
| City-State-Zip: | SUNNY ISLES BEACH FL 33160 |

| | |
|-----------------|---|
| Title | AUTHORIZED MEMBER |
| Name | TOWER ONE REAL ESTATE & INVESTMENTS, LLC |
| Address | 16192 COASTAL HWY |
| City-State-Zip: | LEWES DE 19958 |

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: CELSO MOSCARDI

AMBR

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date