

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000179558

Entity Name: 4S BRICKELL LLC**Current Principal Place of Business:**1435 BRICKELL AVE APT 3501
MIAMI, FL 33131**Current Mailing Address:**1435 BRICKELL AVE APT3501
MIAMI, FL 33131 US**FEI Number:** 47-2362301**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**JAVIER FERNANDEZ Y GODARD
1435 BRICKELL AVE APT3501
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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name FERNANDEZY GODARD, JAVIER
Address 1435 BRICKELL AVE APT 3501
City-State-Zip: MIAMI FL 33131

Title MGM
Name RIBA DE FERNANDEZ, SOFIA
Address 1435 BRICKELL AVE APT 3501
City-State-Zip: MIAMI FL 33131

Title MANAGER
Name FERNANDEZRIBA, XAVIER
Address 1435 BRICKELL AVE APT 3501
City-State-Zip: MIAMI FL 33131

Title AMBR
Name JAVIER FERNANDEZ Y GODARD
Address 1435 BRICKELL AVE APT 3501
City-State-Zip: MIAMI FL 33131

Title AMBR
Name FERNANDEZ, SOFIA RIBA DE
Address 1435 BRICKELL AVE APT 3501
City-State-Zip: MIAMI FL 33131

Title AMBR
Name FERNANDEZ RIBA, XAVIER
Address 1435 BRICKELL AVE APT 3501
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: FERNANDEZY GODARD JAVIER

MANAGER

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date