The above named e	ntity submits this statement for the purpose of changing its regist	ered office or regist	ered agent, or both, i		
SIGNATURE:	STEVEN OVED				
	Electronic Signature of Registered Agent				
Authorized Person(s) Detail :					
Title M	MGR	Title	AUTHORIZED MI		
Nomo /		Nomo	OVED STEVEN		

Current Principal Place of Business:					
920 COLLINS AVENUE					

Entity Name: 235 SOBE HOSPITALITY LLC

920 MIAMI BEACH, FL 33139

Current Mailing Address:

DOCUMENT# L15000030887

138 EAST 31ST STREET SUITE C1 NEW YORK, NY 10016 US

FEI Number: 47-3203504

Name and Address of Current Registered Agent:

OVED, STEVEN 920 COLLINS AVENUE MIAMI BEACH, FL 33139 US

The in the State of Florida.

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.

MANAGER

01/19/2023

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 19, 2023 Secretary of State 8532064751CC

> 01/19/2023 Date

Certificate of Status Desired: No

Authorized Person(s) Detail :					
Title	MGR	Title	AUTHORIZED MEMBER		
Name	AVID, JACK	Name	OVED, STEVEN		
Address	920 COLLINS AVENUE	Address	138 EAST 31ST STREET, STE C-1		
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	NEW YORK NY 10016		

Date

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT