60 EDGEWATER DR APT 5C CORAL GABLES, FL 33133 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	E MICHAEL H NOVAK			02/21/2021
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	NOVAK, MICHAEL H	Name	NOVAK, JASON I	
Address	60 EDGEWATER DR APT 5C	Address	229 CHRYSTIE ST APT 804	
City-State-Zip:	CORAL GABLES FL 33133	City-State-Zip:	NEW YORK NY 10002	
Title	MGR			
Name	NOVAK, ANDREW J			
Address	11511 ELM BLUFF			

### 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000139950

Entity Name: NOVAK FAMILY INVESTMENTS LLC

### **Current Principal Place of Business:**

60 EDGEWATER DR APT 5C CORAL GABLES. FL 33133

### **Current Mailing Address:**

60 EDGEWATER DR APT 5C CORAL GABLES. FL 33133 US

## FEI Number: 47-4851557

### Name and Address of Current Registered Agent:

NOVAK. MICHAEL H 60 ED CORA

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: MICHAEL H NOVAK

City-State-Zip: SAN ANTONIO TX 78230

MANAGER

### 02/21/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Feb 21, 2021 Secretary of State 1047286878CC

Certificate of Status Desired: No