

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000156001

**Entity Name:** GREEN ROCKS PRODUCTS LLC

**Current Principal Place of Business:**

2999 NE 191ST ST  
STE 530  
AVENTURA, FL 33180

**Current Mailing Address:**

180 N. LASALLE STREET  
SUITE 3200  
CHICAGO, IL 60601 US

**FEI Number:** 37-1843778

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200  
PLANTATION, FL 33324 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 MIZRAHI, OFER  
Address 2999 NE 191ST ST  
STE 530  
City-State-Zip: AVENTURA FL 33180

Title MGR  
Name MOSHE, MATSLIAH  
Address 2999 NE 191ST ST  
STE 33180  
City-State-Zip: AVENTURA FL 33180

Title MGR  
Name HOFFMAN, ADAM  
Address 2999 NE 191ST ST  
STE 530  
City-State-Zip: AVENTURA FL 33180

Title MGR  
Name KUGLMANN, GILAD  
Address 2999 NE 191ST ST  
STE 530  
City-State-Zip: AVENTURA FL 33180

Title MGR  
Name SEKI, MAKOTO  
Address 200 BELLVUE PKWY  
SUITE 210  
City-State-Zip: WILMINGTON DE 19809

*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:** OFER MIZRAHI

**MANAGER**

01/20/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date