

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000227341

Entity Name: ZOM ATELIER PARTNERS, LLC**Current Principal Place of Business:**2001 SUMMIT PARK DRIVE
SUITE 300
ORLANDO, FL 32810**Current Mailing Address:**2001 SUMMIT PARK DRIVE
SUITE 300
ORLANDO, FL 32810**FEI Number:** 81-4831989**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 ZOM HOLDING, INC.
Address 2001 SUMMIT PARK DRIVE #300
City-State-Zip: ORLANDO FL 32810

Title MANAGER
Name ZOM HOLDING, LP
Address 2001 SUMMIT PARK DRIVE
SUITE 300
City-State-Zip: ORLANDO FL 32810

Title EVP, TREASURER
Name WARNER, BRIAN J
Address 2001 SUMMIT PARK DRIVE
SUITE 300
City-State-Zip: ORLANDO FL 32810

Title CEO, PRESIDENT
Name WEST, GREGORY T
Address 2001 SUMMIT PARK DRIVE
SUITE 300
City-State-Zip: ORLANDO FL 32810

Title EVP
Name STEPHENS, SAMUEL C III
Address 2001 SUMMIT PARK DRIVE
SUITE 300
City-State-Zip: ORLANDO FL 32810

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: SAMUEL C. STEPHENS, III**AUTHORIZED PERSON****04/21/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date