

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000104655

**Entity Name:** 10850 DORAL LLC

**Current Principal Place of Business:**

10850 NW 30 STREET  
DORAL, FL 33172

**Current Mailing Address:**

10850 NW 30 STREET  
DORAL, FL 33172 US

**FEI Number:** 82-1541616

**Certificate of Status Desired:** No

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

FEIT, MURRAY  
9801 COLLINS AVE  
APT. 16U  
BAL HARBOUR, FL 33154 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	AMBR	Title	AMBR
Name	FEIT, MURRAY	Name	FEIT, MICHAEL
Address	9801 COLLINS AVE, APT. 16U	Address	404 EAST 79 ST, APT 14C
City-State-Zip:	BAL HARBOUR FL 33154	City-State-Zip:	NEW YORK NY 10075

*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:** MURRAY FEIT

**PRESIDENT**

**01/26/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date