

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000086816

**Entity Name:** 331 85TH STREET ASSOCIATES, LLC

**Current Principal Place of Business:**

26 WEST 85TH STREET, STE 1  
NEW YORK, NY 10024

**Current Mailing Address:**

331 85TH STREET ASSOCIATES, LLC C/O: URBAN RESOURCE  
PO BOX 415700  
MIAMI BEACH, FL 33141 US

**FEI Number:** 82-5138675

**Certificate of Status Desired:** No

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

SILBERFARB, PAUL  
4114 BRIARCLIFF CIRCLE  
BOCA RATON, FL 33496 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 AUTHORIZED MEMBER  
Name TAUBER, ALAN  
Address 26 WEST 85TH STREET, STE 1  
City-State-Zip: NEW YORK NY 10024

Title AUTHORIZED MEMBER  
Name SILBERFARB, PAUL  
Address 4114 BRIARCLIFF CIRCLE  
City-State-Zip: BOCA RATON FL 33496

Title AUTHORIZED MEMBER  
Name SILBERFARB, FLORENCE  
Address 4114 BRIARCLIFF CIRCLE  
City-State-Zip: BOCA RATON FL 33496

*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: ALAN L TAUBER

MANAGING MEMBER

05/01/2023

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

\_\_\_\_\_  
Date