SIGNATURE: DAISY MEDINA

that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

		0	0 0				
Authorized Person(s) Detail :							
Title	MANAGER				Title	AUTHORIZED REPRESENTATIVE	
Name	MEDINA, DAI	ISY			Name	SIVAPRAKASHAM, VIJAYALAKSHMI	
Address	5260 NW 109 #7	TH AVE.			Address	5260 NW 109TH AVE. #7	
City-State-Zip:	DORAL FL 3	33178			City-State-Zip:	DORAL FL 33178	

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

MANAGER

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.

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000128069

Entity Name: FTT PROPERTIES USA LLC

Current Principal Place of Business:

5260 NW 109TH AVE. #7 DORAL, FL 33178

Current Mailing Address:

5260 NW 109TH AVE. #7 DORAL, FL 33178 US

FEI Number: 32-0569139

SIGNATURE:

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

SIVAPRAKASHAM, VIJAYALAKSHMI 2335 NW 107TH AVE. SUITE 2M45,MAILBOX 145 MIAMI, FL 33172 US

Date

Certificate of Status Desired: Yes

FILED Mar 14, 2022 Secretary of State 3726202937CC

> 03/14/2022 Date