## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000151469

Entity Name: BRIDGE AVE L, LLC

## **Current Principal Place of Business:**

9525 W BRYN MAWR AVE

SUITE 700

ROSEMONT, IL 60018

## **Current Mailing Address:**

9525 W. BRYN MAWR AVENUE STE 700

**SUITE 150** 

ROSEMONT, IL 60018 US

FEI Number: 83-0972836 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COGENCY GLOBAL INC. 115 NORTH CALHOUN STREET SUITE 4 TALLAHASSEE, FL 32301 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 REPRESENTATIVE Title VP

Name CARROLL, KEVIN Name GROETSEMA, STEVE

Address 201 S. BISCAYNE BLVD, SUITE 1950 Address 9525 W BRYN MAWR AVENUE

City-State-Zip: MIAMI FL 33131

City-State-Zip: ROSEMONT IL 60018

Title CEO

Name POULOS, STEVE

Address 9525 W. BRYN MAWR AVENUE STE Name ZASCHE, SEAN

700 Address 9525 W. BRYN MAWR AVENUE STE SUITE 150 700

FE 150 700 SUITE 150

City-State-Zip: ROSEMONT IL 60018

City-State-Zip: ROSEMONT IL 60018

Title PRESIDENT Title VP

Name PRICCO, ANTHONY Name SIEGEL, NICK

Address 9525 W. BRYN MAWR AVENUE STE 700 Address 9525 W. BRYN MAWR AVENUE STE

SUITE 150 700 SUITE 150

City-State-Zip: ROSEMONT IL 60018

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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: ANTHONY PRICCO PRESIDENT 02/08/2023

FILED Feb 08, 2023

**Secretary of State** 

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