#### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000207694

Entity Name: VILLA SOTA BOCA TOWN CENTER LLC

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

6000 GLADES RD SUITE 1048A BOCA RATON, FL 33431

## **Current Mailing Address:**

6000 GLADES RD SUITE 1048A BOCA RATON, FL 33431 US

## FEI Number: 83-1876184

## Name and Address of Current Registered Agent:

ROZENCWAIG & NADEL, LLP 301 W HALLANDALE BEACH BLVD HALLANDALE BEACH, FL 33009 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

#### Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	COHEN, AVY A	Name	COHEN, AARON A
Address	6000 GLADES RD SUITE 1048A	Address	6000 GLADES RD SUITE 1048A
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
Title	MGR	Title	MGR
Name	GABRIEL DE CHENE, CARLOS	Name	PFEFFER, VIVIAN
Address	6000 GLADES RD SUITE 1048A	Address	6000 GLADES RD SUITE 1048A
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
Title	MGR	Title	MGR
Name	RAMP, MAXIMILIANO R	Name	ARMAS, BENIGNO A
Address	6000 GLADES RD SUITE 1048A	Address	6000 GLADES RD SUITE 1048A
City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431

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: AARON A COHEN

MGR

Date

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date