

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000238162

**Entity Name:** CAYON GP TRUST, LLC

**Current Principal Place of Business:**

7480 SW 40TH ST STE 700  
MIAMI, FL 33155

**Current Mailing Address:**

7480 SW 40TH ST STE 700  
MIAMI, FL 33155 US

**FEI Number:** 83-2232864

**Certificate of Status Desired:** No

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

HASNER, MARK M  
SUNTRUST INTERNATIONAL CENTER, ONE SE 3RD  
AVE STE 2950  
MIAMI, FL 33131 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	MGR	Title	MGR
Name	CAYON, MAURICE	Name	CAYON, ROSA M
Address	7480 SW 40TH ST STE 700	Address	7480 SW 40TH ST STE 700
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	MIAMI FL 33155

*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:** MAURICE CAYON

**MANAGER**

**01/18/2024**

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

\_\_\_\_\_  
Date