

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000264833

**Entity Name:** WAVERLEY SP 2 GP, LLC

**Current Principal Place of Business:**

3921 SW 47 AVENUE  
SUITE 1013  
FORT LAUDERDALE, FL 33314

**Current Mailing Address:**

3921 SW 47 AVENUE  
SUITE 1013  
FORT LAUDERDALE, FL 33314 UN

**FEI Number:** 84-3744033

**Certificate of Status Desired:** No

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

WILLIAM J. SEGAL, P.A.  
20801 BISCAYNE BLVD.  
SUITE 304  
AVENTURA, FL 33180 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  
Name SPEAR, DANIEL  
Address 3921 SW 47 AVENUE, SUITE 1013  
City-State-Zip: FORT LAUDERDALE 33314

Title MGR  
Name SPEAR, JEFFREY  
Address 3921 SW 47 AVENUE, SUITE 1013  
City-State-Zip: FORT LAUDERDALE FL 33314

Title MGR  
Name SPEAR, DAVID  
Address 3921 SW 47 AVENUE, SUITE 1013,  
City-State-Zip: FORT LAUDERDALE FL 33314

*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:** DAVID SPEAR

MGR

04/26/2023

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

\_\_\_\_\_  
Date