### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L19000293494

Entity Name: TORTICITY, LLC

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

2300 GLADES ROAD SUITE 400E BOCA RATON, FL 33431

### **Current Mailing Address:**

2300 GLADES ROAD SUITE 400E BOCA RATON, FL 33431 US

#### FEI Number: 84-3945317

### Name and Address of Current Registered Agent:

GY CORPORATE SERVICES, INC. 777 S FLAGLER DR STE 500E WEST PALM BEACH, FL 33401 US Certificate of Status Desired: No

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           | MANAGER, MANAGING DIRECTOR     | Title           | MANAGER                        |
|-----------------|--------------------------------|-----------------|--------------------------------|
| Name            | EVANS, THOMAS R.               | Name            | MIKLES, LEE E.                 |
| Address         | 2300 GLADES ROAD<br>SUITE 400E | Address         | 2300 GLADES ROAD<br>SUITE 400E |
| City-State-Zip: | BOCA RATON FL 33431            | City-State-Zip: | BOCA RATON FL 33431            |
|                 |                                |                 |                                |
| Title           | MANAGER                        | Title           | MANAGER                        |
| Name            | DAKOLIAS, DEAN                 | Name            | SHRIBMAN, DAN                  |
| Address         | 2300 GLADES ROAD<br>SUITE 400E | Address         | 2300 GLADES ROAD<br>SUITE 400E |
| City-State-Zip: | BOCA RATON FL 33431            | City-State-Zip: | BOCA RATON FL 33431            |
|                 |                                |                 |                                |
| Title           | CEO                            |                 |                                |
| Name            | BLAIN, SHANE                   |                 |                                |
| Address         | 2300 GLADES ROAD<br>SUITE 400E |                 |                                |

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: EVANS, THOMAS R.

City-State-Zip: BOCA RATON FL 33431

MGR

02/08/2024

Date

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Feb 08, 2024 Secretary of State 7189523183CC