

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000173382

**Entity Name:** 641 WHITE PELICAN, LLC

**Current Principal Place of Business:**

C/O NAI/MERIN HUNTER CODMAN  
1601 FORUM PLACE  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

C/O NAI/MERIN HUNTER CODMAN  
1601 FORUM PLACE  
WEST PALM BEACH, FL 33401 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MERIN, NEIL  
C/O NAI/MERIN HUNTER CODMAN  
1601 FORUM PLACE  
WEST PALM BEACH, FL 33401 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            AMBR  
Name            MERIN, ANDREW  
Address        4 ASCOT WAY  
City-State-Zip: FORT LEE NJ 06024

Title            AMBR  
Name            MERIN, VIOLETTA  
Address        4 ASCOT WAY  
City-State-Zip: FORT LEE NJ 06024

Title            AMBR  
Name            MERIN, DAVID  
Address        1319 EAST BALBOA BLVD UNIT A  
City-State-Zip: NEW PORT CA 92661

Title            AMBR  
Name            MERIN, DARA  
Address        906 CRESTON ROAD  
City-State-Zip: BERKELEY CA 94708

*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:** ANDREW MERIN

AMBR

01/30/2024

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

\_\_\_\_\_  
Date