

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000297312

**Entity Name:** 10850 INVESTMENT GROUP, LLC

**Current Principal Place of Business:**

1881 N UNIVERSITY DRIVE 204  
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

P.O. BOX 8765  
CORAL SPRINGS, FL 33075 US

**FEI Number:** 85-3577156

**Certificate of Status Desired:** No

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

EISENSMITH, JEFFREY R P.A.  
5561 NORTH UNIVERSITY DRIVE  
SUITE 103  
CORAL SPRINGS, FL 33067 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 ZWICK, MATTHEW  
Address 12466 CLASSIC DR  
City-State-Zip: CORAL SPRINGS 10 33071

Title AMBR  
Name KASSAM, HAKIM  
Address 2590 NW 112TH AVE  
City-State-Zip: CORAL SPRINGS FL 33065

Title AMBR  
Name HEALEY, DAVID  
Address 7184 NW 122 AVE  
City-State-Zip: PARKLAND FL 33076

Title AMBR  
Name COHEN, ALAN  
Address 11953 NW 66 COURT  
City-State-Zip: PARKLAND FL 33076

*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:** MATTHEW J ZWICK

**MANAGING MEMBER**

**04/05/2022**

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

\_\_\_\_\_  
Date