

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000349789

**Entity Name:** 2TH LLC

**Current Principal Place of Business:**

10201 E BAY HARBOR DR. #307  
BAY HARBOR ISLANDS, FL 33154

**Current Mailing Address:**

10201 E BAY HARBOR DR. #307  
BAY HARBOR ISLANDS, FL 33154 US

**FEI Number:** 85-4201285

**Certificate of Status Desired:** No

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

LEFKOWITZ, ARKADY  
10201 E BAY HARBOR DR. #307  
BAY HARBOR ISLANDS, FL 33154 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            LEFKOWITZ, ARKADY  
Address        10201 E BAY HARBOR DR. #307  
City-State-Zip: BAY HARBOR ISLANDS FL 33154

*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:** ARKADY LEFKOWITZ

**MEMBER**

**04/27/2023**

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

\_\_\_\_\_ Date