

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000096198

**FILED**  
**Feb 25, 2024**  
**Secretary of State**  
**3082513003CC**

**Entity Name:** HERSH MANAGEMENT LLC

**Current Principal Place of Business:**

1835 EAST HALLANDALE BEACH BOULEVARD  
SUITE 716  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

1835 EAST HALLANDALE BEACH BOULEVARD  
SUITE 716  
HALLANDALE BEACH, FL 33009 US

**FEI Number:** 37-2002577

**Certificate of Status Desired:** No

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

HERSHKOVICH, AVITAL C  
1835 EAST HALLANDALE BEACH BOULEVARD  
# 716  
HALLANDALE BEACH, FL 33009 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 HERSHKOVICH, AVITAL C  
Address 1835 EAST HALLANDALE BEACH  
BOULEVARD, 716  
City-State-Zip: HALLANDALE BEACH FL 33009

Title MGR  
Name ZIKRI, SHIMON  
Address 8849 VIA BELLA NOTTE  
City-State-Zip: ORLANDO FL 32836

*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:** AVITAL HERSHKOVICH

**MANAGER**

**02/25/2024**

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

\_\_\_\_\_  
Date