

**2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L22000399616

**Entity Name:** VAULT COMO LLC

**Current Principal Place of Business:**

50 OGDEN PL  
MORRISTOWN, NJ 07960

**Current Mailing Address:**

50 OGDEN PL  
MORRISTOWN, NJ 07960 US

**FEI Number:** 88-4165207

**Certificate of Status Desired:** No

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

GOLDENBERG, SPENCER  
3440 HOLLYWOOD BLVD  
SUITE 100  
HOLLYWOOD, FL 33021 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:** SPENCER GOLDENBERG

06/14/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MEMBER, 25% OWNER  
Name SHEAR, MATTHEW  
Address 11000 SW 25TH ST  
City-State-Zip: DAVIE FL 33324

Title MEMBER, 25% OWNER  
Name RAIFFE, ADAM  
Address 50 OGDEN PL  
City-State-Zip: MORRISTOWN NJ 07960

Title MEMBER, 25% OWNER  
Name DAVID, JASKEL  
Address 34 FRUG ST  
APT 1  
City-State-Zip: TEL AVIV 6341736

Title MEMBER, 25% OWNER  
Name ARI, KAPLAN  
Address 13258 CLYDE PARK AVE  
City-State-Zip: HAWTHORNE CA 90250

*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:** ADAM RAIFFE

MEMBER, 25% OWNER

06/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date