

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000093770

**Entity Name:** LEMARTEC-BDI JV, LLC**Current Principal Place of Business:**3390 MARY STREET, SUITE 166  
COCONUT GROVE, FL 33133**Current Mailing Address:**3390 MARY STREET, SUITE 166  
COCONUT GROVE, FL 33133 US**FEI Number:** 92-2722448**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 PMGR  
Name GARCIA-TUNON, MANUEL  
Address 3390 MARY STREET, SUITE 166  
City-State-Zip: COCONUT GROVE FL 33133

Title V  
Name SUAREZ, MAIRA  
Address 3390 MARY STREET, SUITE 166  
City-State-Zip: COCONUT GROVE FL 33133

Title VSM  
Name ROSELL, TEOBALDO III  
Address 7270 NW 12 STREET, SUITE 200  
City-State-Zip: MIAMI FL 33126

Title VT  
Name GARCIA-TUNON, JOSE  
Address 3390 MARY STREET, SUITE 166  
City-State-Zip: COCONUT GROVE FL 33133

Title V  
Name ROSELL, CARLOS F  
Address 7270 NW 12 STREET, SUITE 200  
City-State-Zip: MIAMI FL 33126

Title AMBR  
Name LEMARTEC CORPORATION  
Address 3390 MARY STREET, SUITE 166  
City-State-Zip: COCONUT GROVE FL 33133

*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:** MAIRA SUAREZ

V

02/16/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date