

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000153606

**Entity Name:** 1080 BRICKELL AVE ASSOCIATES, LLC

**Current Principal Place of Business:**

1080 BRICKELL AVE  
4200  
MIAMI, FL 33131

**FILED**  
**Feb 20, 2024**  
**Secretary of State**  
**9450958557CC**

**Current Mailing Address:**

1080 BRICKELL AVENUE  
4200  
MIAMI, FL 33131 US

**FEI Number:** 92-3430292

**Certificate of Status Desired:** No

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

SOLOMON, COOPERMAN, RECONDO AND WEISS  
1101 BRICKELL AVENUE  
1101N  
MIAMI, FL 33131 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 TORTI, THOMAS  
Address 1080 BRICKELL AVENUE, UNIT 4200  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name TORTI, NANCY  
Address 1080 BRICKELL AVENUE, UNIT 4200  
City-State-Zip: MIAMI FL 33131

*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:** THOMAS TORTI

**MEMBER**

**02/20/2024**

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

\_\_\_\_\_  
Date