2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000289486

Entity Name: V&E 1416 BRICKELL LLC

Current Principal Place of Business:

40 SW 13 ST STE 301BLVD STE 1050 MIAMI, FL 33130

Current Mailing Address:

2121 PONCE DE LEON BLVD STE 1050 CORAL GABLES, FL 33143

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA INC. 2121 PONCE DE LEON BLVD STE 1050 CORAL GABLES, FL 33134 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

Authorized Person(s) Detail :

| Title | MGRM | Title | MGRM |
|-----------------|---|-----------------|--|
| Name | JACOBO, JOSE | Name | DIB, JAMIL |
| Address | 2121 PONCE DE LEON BLVD STE 1050 | Address | 2121 PONCE DE LEON BLVD STE 1050 |
| City-State-Zip: | CORAL GABLES FL 33134 | City-State-Zip: | CORAL GABLES FL 33134 |
| | | | |
| Title | MGRM | Title | MGR |
| Title Name | MGRM ARAOZ, EDUARDO | Title Name | MGR HURTADO, HECTOR |
| | | | - |
| Name | ARAOZ, EDUARDO 2121 PONCE DE LEON BLVD STE | Name | HURTADO, HECTOR 2121 PONCE DE LEON BLVD STE |

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: JACOBO, JOSE

MGRM

04/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 19, 2024 Secretary of State 7252152954CC

Date

Certificate of Status Desired: No