

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000299176

Entity Name: ABCD FLORIDA RESI MEMBER LLC

Current Principal Place of Business:

399 WHALLEY AVE STE 103
WOODBIDGE, CT 06511

Current Mailing Address:

PO BOX 3616
WOODBIDGE, CT 06525

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FEINBERG, JEFFERY ESQ
4651 SHERIDAN STREET STE 200
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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name GUREVITCH, MENACHEM
Address 399 WHALLEY AVE STE 103
City-State-Zip: NEW HAVEN CT 06511

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: MENACHEM GUREVITCH

MANAGER

04/04/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date