

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000462835

Entity Name: HOLOCAUST MUSEUM OF SOUTH FLORIDA LLC

Current Principal Place of Business:

3064 BIRKDALE
WESTON, FL 33332

Current Mailing Address:

3064 BIRKDALE
WESTON, FL 33332 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEINER, CRAIG R
3064 BIRKDALE
WESTON, FL 33332 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 HOLOCAUST LEARNING AND
EDUCATION FUND, INC
Address 3064 BIRKDALE
City-State-Zip: WESTON FL 33332

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: CRAIG WEINER

**PRESIDENT OF
MANAGER**

02/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date