

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000473540

**Entity Name:** FL 10060 UNIVERSITY LLC

**Current Principal Place of Business:**

929 PARADISE WAY  
PALO ALTO, CA 94306

**Current Mailing Address:**

929 PARADISE WAY  
PALO ALTO, CA 94306 US

**FEI Number:** 93-4074328

**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 MGR  
Name LO, FELIX  
Address 929 PARADISE WAY  
City-State-Zip: PALO ALTO CA 94306

Title MGR  
Name LO, KRISTEN  
Address 929 PARADISE WAY  
City-State-Zip: PALO ALTO CA 94306

*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:** FELIX LO

**MANAGER**

**02/07/2024**

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

\_\_\_\_\_  
Date