

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000523992

**Entity Name:** 347 POTTER LLC

**Current Principal Place of Business:**

150 E. PALMETTO RD.  
STE. 404  
BOCA RATON, FL 33432

**Current Mailing Address:**

150 E. PALMETTO RD.  
STE. 404  
BOCA RATON, FL 33432 US

**FEI Number:** 93-4587726

**Certificate of Status Desired:** No

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

BEILINE, MICHAEL  
19195 MYSTIC POINTE DR.  
#PH3  
MIAMI, FL 33180 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 BEILINE, DANIEL  
Address 150 E. PALMETTO RD.  
STE. 404  
City-State-Zip: BOCA RATON FL 33432

Title MGR  
Name BEILINE, MICHAEL  
Address 150 E. PALMETTO RD.  
STE. 404  
City-State-Zip: BOCA RATON FL 33432

Title MGR  
Name ZAKEN, IDO  
Address 150 E. PALMETTO RD.  
STE. 404  
City-State-Zip: BOCA RATON FL 33432

*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:** MICHAEL BEILINE

**MANAGER**

**04/09/2024**

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

\_\_\_\_\_  
Date