2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006046

Entity Name: ACQUALINA CONDOS I, LLC

Current Principal Place of Business:

17780 COLLINS AVENUE

2ND FLOOR

SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

17780 COLLINS AVENUE 2ND FLOOR

SUNNY ISLES BEACH, FL 33160 US

FEI Number: 20-5770677 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

FILED Apr 24, 2019

Secretary of State

7941625006CC

Authorized Person(s) Detail:

Title MANAGER Title EVP

Name TG CO MANAGEMENT, INC. Name LIEB, JAMES

Address 17780 COLLINS AVENUE Address 17780 COLLINS AVENUE

2ND FLOOR 2ND FLOOR

City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160

Title AVP Title CFO, SRVP

Name TORPEY, CARITE Name SHMUELI, OREN

Address 17780 COLLINS AVENUE Address 17780 COLLINS AVENUE

2ND FLOOR 2ND FLOOR

City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MEMBER Title CONTROLLER

Name ACQUALINA GROUP, LLC Name WEINFELD, GARY

Address 17780 COLLINS AVENUE Address 17780 COLLINS AVENUE

2ND FLOOR 2ND FLOOR

2ND FLOOR

City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160

TitleTREASURERTitleEVP, MANAGING DIRECTORNameGARCIA, ANDRESNameROBERTSON, JOHNATHAN

Address 17780 COLLINS AVENUE Address 17780 COLLINS AVENUE

2ND FLOOR 2ND FLOOR

City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160

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: OREN SHMUELI SRVP/CFO 04/24/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date