

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000002384

**Entity Name:** VERTICAL BRIDGE MANAGEMENT, LLC

**Current Principal Place of Business:**

750 PARK OF COMMERCE DRIVE  
SUITE 200  
BOCA RATON, FL 33487

**Current Mailing Address:**

750 PARK OF COMMERCE DRIVE  
SUITE 200  
BOCA RATON, FL 33487 US

**FEI Number:** 35-2495267

**Certificate of Status Desired:** No

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

COGENCY GLOBAL INC.  
115 NORTH CALHOUN ST.  
SUITE 4  
TALLAHASSEE, FL 32301 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            CEO  
Name            GELLMAN, ALEX  
Address        750 PARK OF COMMERCE DRIVE  
                  SUITE 200  
City-State-Zip: BOCA RATON FL 33487

Title            MEMBER  
Name            VERTICAL BRIDGE REIT, LLC  
Address        750 PARK OF COMMERCE DRIVE  
                  SUITE 200  
City-State-Zip: BOCA RATON FL 33487

Title            SENIOR VICE PRESIDENT  
Name            MARINBERG, DANIEL  
Address        750 PARK OF COMMERCE DRIVE  
                  SUITE 200  
City-State-Zip: BOCA RATON FL 33487

Title            CFO  
Name            ROMANIW, MICHAEL  
Address        750 PARK OF COMMERCE DRIVE  
                  SUITE 200  
City-State-Zip: BOCA RATON FL 33487

*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:** ALEX GELLMAN

CEO

04/29/2021

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

\_\_\_\_\_  
Date