

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000003163

Entity Name: HH GULFSTREAM LAND HOLDINGS, LLC**Current Principal Place of Business:**109 SE 5TH AVE 2ND FLOOR
DELRAY BEACH, FL 33483**Current Mailing Address:**109 SE 5TH AVE 2ND FLOOR
DELRAY BEACH, FL 33483 US**FEI Number:** 38-3931077**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MILMOE, WILLIAM
109 SE 5TH AVE 2ND FLOOR
DELRAY BEACH, FL 33483 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 | CDS GULFSTREAM, LLC |
| Address | 109 SE 5TH AVE 2ND FLOOR |
| City-State-Zip: | DELRAY BEACH FL 33483 |

| | |
|-----------------|--------------------------|
| Title | PRESIDENT |
| Name | MILMOE, WILLIAM H |
| Address | 109 SE 5TH AVE 2ND FLOOR |
| City-State-Zip: | DELRAY BEACH FL 33483 |

| | |
|-----------------|--------------------------|
| Title | VP |
| Name | VERMILYEA, KAREN C |
| Address | 109 SE 5TH AVE 2ND FLOOR |
| City-State-Zip: | DELRAY BEACH FL 33483 |

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: WILLIAM MILMOE

MGR

04/05/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date