

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M21000009367

Entity Name: TWO WORLDS, LLC

Current Principal Place of Business:

10201 COLLINS AVE., UNIT 1102S
BAL HARBOUR, FL 33154

Current Mailing Address:

10201 COLLINS AVE., UNIT 1102S
BAL HARBOUR, FL 33154 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SHIEKMAN, JOHN L
200 E. BROWARD BLVD., STE. 1800
FORT LAUDERDALE, FL 33301 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 MBR
Name RODACK, MICHAEL D
Address 10201 COLLINS AVE., UNIT 1102S
City-State-Zip: BAL HARBOUR FL 33154

Title AP
Name RODACK, MICHAEL D
Address 10201 COLLINS AVE., UNIT 1102S
City-State-Zip: BAL HARBOUR FL 33154

Title P
Name RODACK, MICHAEL D
Address 10201 COLLINS AVE., UNIT 1102S
City-State-Zip: BAL HARBOUR FL 33154

Title MBR
Name RODACK, THERESA S
Address 10201 COLLINS AVE., UNIT 1102S
City-State-Zip: BAL HARBOUR FL 33154

Title AP
Name RODACK, THERESA S
Address 10201 COLLINS AVE., UNIT 1102S
City-State-Zip: BAL HARBOUR FL 33154

Title VP
Name RODACK, THERESA S
Address 10201 COLLINS AVE., UNIT 1102S
City-State-Zip: BAL HARBOUR FL 33154

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 DAVID RODACK

03/08/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date