

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M21000011660

Entity Name: NORTH RESIDENCE OWNER VENTURES, LLC

Current Principal Place of Business:

333 EARLE OVINGTON BLVD
SUITE 900
UNIONDALE, NY 11553

Current Mailing Address:

333 EARLE OVINGTON BLVD
SUITE 900
UNIONDALE, NY 11553 US

FEI Number: NOT APPLICABLE

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

Authorized Person(s) Detail :

Title AUTHORIZED SIGNATORY
Name NATALONE, JOHN
Address 333 EARLE OVINGTON BLVD
SUITE 900
City-State-Zip: UNIONDALE NY 11553

Title AUTHORIZED SIGNATORY
Name MARTELLO, JOSEPH
Address 333 EARLE OVINGTON BLVD
SUITE 900
City-State-Zip: UNIONDALE NY 11553

Title AUTHORIZED SIGNATORY
Name CANDREVA, MELISSA
Address 333 EARLE OVINGTON BLVD
SUITE 900
City-State-Zip: UNIONDALE NY 11553

Title AUTHORIZED SIGNATORY
Name CONNOLLY, WILLIAM
Address 333 EARLE OVINGTON BLVD
SUITE 900
City-State-Zip: UNIONDALE NY 11553

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 CONNOLLY

**AUTHORIZED
SIGNATORY**

04/30/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date