

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000016580

**Entity Name:** BRWD COMMUTER LLC

**Current Principal Place of Business:**

350 NW 1ST AVE, STE 200  
MIAMI, FL 33128

**Current Mailing Address:**

350 NW 1ST AVE, STE 200  
MIAMI, FL 33128 US

**FEI Number:** 87-3924713

**Certificate of Status Desired:** No

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

BERGMANN, CYNTHIA  
350 NW 1ST AVE, STE 200  
MIAMI, FL 33128 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 VP, ASST. SECRETARY  
Name COBB, KOLLEEN  
Address 350 NW 1ST AVE, STE 200  
City-State-Zip: MIAMI FL 33128

Title VP, SECRETARY  
Name BERGMANN, CYNTHIA  
Address 350 NW 1ST AVE, STE 200  
City-State-Zip: MIAMI FL 33128

Title PRES  
Name GODDARD, PATRICK W  
Address 350 NW 1ST AVE, STE 200  
City-State-Zip: MIAMI FL 33128

Title VP  
Name GODOY, JUAN  
Address 350 NW 1ST AVE, STE 200  
City-State-Zip: MIAMI FL 33128

Title CFO, VP  
Name SWIATEK, JEFFREY C  
Address 350 NW 1ST AVE, STE 200  
City-State-Zip: MIAMI FL 33128

Title VP, CAO  
Name YARRIS, CHRISTOPHER C.  
Address 350 NW 1ST AVE, STE 200  
City-State-Zip: MIAMI FL 33128

*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:** KOLLEEN O.P. COBB

**VICE PRESIDENT**

**05/01/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date