

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M22000006904

Entity Name: VAULT AVENIDA ENGLEWOOD LLC**Current Principal Place of Business:**1750 S. TELEGRAPH RD., SUITE 310
BLOOMFIELD HILLS, MI 48304**Current Mailing Address:**1750 S. TELEGRAPH RD., SUITE 310
BLOOMFIELD HILLS, MI 48304 US**FEI Number:** 87-0935814**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	VAULT AVENIDA NET LEASE FUND I LLC
Address	1750 S. TELEGRAPH RD., SUITE 310
City-State-Zip:	BLOOMFIELD HILLS MI 48304

Title	AP
Name	JAHNKE, ADAM
Address	1750 S. TELEGRAPH RD., SUITE 310
City-State-Zip:	BLOOMFIELD HILLS MI 48304

Title	MGR
Name	VAULT FUND MANAGER I LLC
Address	1750 S. TELEGRAPH RD., SUITE 310
City-State-Zip:	BLOOMFIELD HILLS MI 48304

Title	AP
Name	HAMMERS, KATHERINE L
Address	39400 WOODWARD AVE., SUITE 101
City-State-Zip:	BLOOMFIELD HILLS MI 48304

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: ADAM JAHNKE**AUTHORIZED
REPRESENTATIVE****03/15/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date