appears above, or on an attachment with all other like empowered.

SIGNATURE: LARKIN JEREMY

Electronic Signature of Signing General Partner Detail

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name

# 2024 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A23498

Entity Name: PASS SKLAR CENTER, LTD.

# **Current Principal Place of Business:**

801 NW 37TH AVENUE 205 MIAMI, FL 33125

# **Current Mailing Address:**

9655 SOUTH DIXIE HIGHWAY SUITE 300 MIAMI, FL 33156 US

# FEI Number: 59-2763365

# Name and Address of Current Registered Agent:

LARKIN, JEREMY 9655 SOUTH DIXIE HIGHWAY SUITE 300 MIAMI, FL 33156 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: JEREMY LARKIN

Electronic Signature of Registered Agent

# General Partner Detail :

Document #V23618NameCAPITAL SQUARE, INC.Address801 NW 37TH AVE., #205

City-State-Zip: MIAMI FL 33125

REGISTERED AGENT

02/19/2024

FILED Feb 19, 2024 Secretary of State 9769369020CC

Certificate of Status Desired: No

02/19/2024 Date

Date