**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**
**Jan 03, 2025**
**Secretary of State**
**9878252734CC**

DOCUMENT# L00000006181

**Entity Name:** SIERRA FLORIDA HOTELS, LLC

**Current Principal Place of Business:**

801 NORTH BRAND BLVD., SUITE 1010
GLENDALE, CA 91203

**Current Mailing Address:**

801 NORTH BRAND BLVD., SUITE 1010
GLENDALE, CA 91203 US

**FEI Number: 95-4822212**

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE, FL 32301 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: KATHY BROWN 01/03/2025

Electronic Signature of Registered Agent — Date

**Authorized Person(s) Detail :**

| | | | |
|---|---|---|---|
| Title | AUTHORIZED MEMBER, MANAGER | Title | AUTHORIZED MEMBER |
| Name | FREEBERG, DANIEL | Name | SIERRA LAND GROUP, INC. |
| Address | 801 NORTH BRAND BLVD., SUITE 1010 | Address | 801 NORTH BRAND BLVD., SUITE 1010 |
| City-State-Zip: | GLENDALE CA 91203 | City-State-Zip: | GLENDALE CA 91203 |
| Title | AUTHORIZED MEMBER | Title | AUTHORIZED MEMBER |
| Name | SIERRA-ORLANDO, INC. | Name | SIERRA-SANTA CLARA, INC. |
| Address | 801 NORTH BRAND BLVD., SUITE 1010 | Address | 801 NORTH BRAND BLVD., SUITE 1010 |
| City-State-Zip: | GLENDALE CA 91203 | City-State-Zip: | GLENDALE CA 91203 |
| Title | AUTHORIZED REPRESENTATIVE | Title | AUTHORIZED REPRESENTATIVE |
| Name | KAPLAN, DANIEL | Name | CARR, JOSHUA |
| Address | 801 NORTH BRAND BLVD., SUITE 1010 | Address | 801 NORTH BRAND BLVD., SUITE 1010 |
| City-State-Zip: | GLENDALE CA 91203 | City-State-Zip: | GLENDALE CA 91203 |
| Title | AUTHORIZED REPRESENTATIVE | Title | AUTHORIZED REPRESENTATIVE |
| Name | MORA, GRACE | Name | PIEDRA, AMAURY |
| Address | 801 NORTH BRAND BLVD., SUITE 1010 | Address | 801 NORTH BRAND BLVD., SUITE 1010 |
| City-State-Zip: | GLENDALE CA 91203 | City-State-Zip: | GLENDALE CA 91203 |

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*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: KATHY BROWN SECRETARY 01/03/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date

## Authorized Person(s) Detail Continued :

| | |
|---|---|
| Title | AUTHORIZED REPRESENTATIVE |
| Name | BROWN, KATHY |
| Address | 801 NORTH BRAND BLVD., SUITE 1010 |
| City-State-Zip: | GLENDALE CA 91203 |