2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000013943

Entity Name: MERRICK VIEW HOLDINGS, LLC

Current Principal Place of Business:

4425 PONCE DE LEON BLVD., 4TH FLOOR CORAL GABLES, FL 33146

Current Mailing Address:

4425 PONCE DE LEON BLVD., 4TH FLOOR CORAL GABLES, FL 33146

FEI Number: 81-0645557

Name and Address of Current Registered Agent:

BOMSTEIN, BRIAN E 4425 PONCE DE LEON BLVD., 4TH FLOOR CORAL GABLES, FL 33146 US Apr 27, 2021 Secretary of State 0799584841CC

Date

FILED

Certificate of Status Desired: No

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

Authorized Person(s) Detail :

Title	MGRP	Title	MGRSVP
Name	ERTEL, DAVID	Name	QUINT, DAVID
Address	4425 PONCE DE LEON BLVD, 4TH	Address	4425 PONCE DE LEON BLVE, 4TH FL
City Ctata Zia	FLOOR	City-State-Zip:	MIAMI FL 33146
City-State-Zip:	MIAMI FL 33146	T . (1 -	0.45
Title	SVS	Title	SVP
Name	BOMSTEIN, BRIAN E	Name	GOLDMAN, JOEL
Address	4425 PONCE DE LEON BLVD, 4TH FLR	Address	4425 PONCE DE LEON BLVD, 4TH FL
		City-State-Zip:	MIAMI FL 33146
City-State-Zip:	CORAL GABLES FL 33146	Title	SVP & ASST SECTY
Title	SVP	Name	CARR, THOMAS F
Name	WILLIAMS, MARVIN	Address	4425 PONCE DE LEON BLVD., 4TH FLOOR
Address	4425 PONCE DE LEON BLVD., 4TH FLOOR	City-State-Zip:	
City-State-Zip:	CORAL GABLES FL 33146		
		Title	SVP & CONTROLLER
Title	SVP	Name	GLASSMAN, MARK
Name	LOMINAC, EVE	Address	4425 PONCE DE LEON BLVD., 4TH
Address	4425 PONCE DE LEON BLVD., 4TH FLOOR	City-State-Zip:	FLOOR CORAL GABLES FL 33146
City-State-Zip:	CORAL GABLES FL 33146		
		Continues on page 2	

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: BRIAN E. BOMSTEIN

SVP

04/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail Continued :

Title	SVP	Title	SVP
Name	O'NEIL, SEAN	Name	CHIMIENTI, ANTONIO
Address	4425 PONCE DE LEON BLVD., 4TH FLOOR	Address	4425 PONCE DE LEON BLVD., 4TH FLOOR
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146