

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000020788

Entity Name: S & S MILTON LLC

Current Principal Place of Business:

3333 NEW HYDE PARK RD
SUITE 100
NEW HYDE PARK, NY 11042

Current Mailing Address:

3333 NEW HYDE PARK RD
SUITE 100
NEW HYDE PARK, NY 11042 US

FEI Number: 20-8546889

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 MANAGING MEMBER
Name TANDEM DEVELOPMENT HOLDCO, LLC
Address 3333 NEW HYDE PARK RD SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name FLYNN, CONOR C.
Address 3333 NEW HYDE PARK RD SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name COOPER, ROSS
Address 3333 NEW HYDE PARK RD SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name COHEN, GLENN G.
Address 3333 NEW HYDE PARK RD SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name EDWARDS, RAYMOND
Address 3333 NEW HYDE PARK RD SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name JAMIESON, DAVID
Address 3333 NEW HYDE PARK RD SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name BAZYDLO, GARY
Address 3333 NEW HYDE PARK RD SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name BRIAMONTE, BARBARA E.
Address 3333 NEW HYDE PARK RD SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

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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: HARVEY G. WEINREB

AUTHORIZED
SIGNATORY

04/23/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title AUTHORIZED SIGNATORY
Name DOOLEY, PAUL
Address 3333 NEW HYDE PARK RD
SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name PUMA, PAUL D.
Address 3333 NEW HYDE PARK RD
SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name WEINREB, HARVEY G.
Address 3333 NEW HYDE PARK RD
SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name PALACIO, DEBORAH I.
Address 3333 NEW HYDE PARK RD
SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name SMITH, KEVIN
Address 3333 NEW HYDE PARK RD
SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042

Title AUTHORIZED SIGNATORY
Name WESTBROOK, PAUL
Address 3333 NEW HYDE PARK RD
SUITE 100
City-State-Zip: NEW HYDE PARK NY 11042