

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000071821

Entity Name: NORMANDY ESTATES, LLC

Current Principal Place of Business:

8800 NORTH BRONX AVENUE
2ND FLOOR
SKOKIE, IL 60077

Current Mailing Address:

8800 NORTH BRONX AVENUE
2ND FLOOR
SKOKIE, IL 60077 US

FEI Number: 80-0226588

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 | MANAGER | Title | SIGNATORY |
| Name | LFWP MANAGER, LLC | Name | BUELTMANN, TOM |
| Address | 8800 NORTH BRONX AVENUE 2ND FLOOR | Address | 8800 NORTH BRONX AVENUE 2ND FLOOR |
| City-State-Zip: | SKOKIE IL 60077 | City-State-Zip: | SKOKIE IL 60077 |

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: TOM BUELTMANN

AUTHORIZED PERSON

02/22/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date