

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000072692

**Entity Name:** LEN X, LLC

**Current Principal Place of Business:**

700 N.W. 107TH AVENUE  
SUITE 400  
MIAMI, FL 33172

**Current Mailing Address:**

700 N.W. 107TH AVENUE  
SUITE 400  
MIAMI, FL 33172 US

**FEI Number:** 26-3103505

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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           | MGR                                | Title           | MGR                                |
| Name            | KAISERMAN, DAVID                   | Name            | BESSETTE, DIANE                    |
| Address         | 700 N.W. 107TH AVENUE<br>SUITE 400 | Address         | 700 N.W. 107TH AVENUE<br>SUITE 400 |
| City-State-Zip: | MIAMI FL 33172                     | City-State-Zip: | MIAMI FL 33172                     |
|                 |                                    |                 |                                    |
| Title           | MGR                                |                 |                                    |
| Name            | SUSTANA, MARK                      |                 |                                    |
| Address         | 700 N.W. 107TH AVENUE<br>SUITE 400 |                 |                                    |
| City-State-Zip: | MIAMI FL 33172                     |                 |                                    |

*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:** MARK SUSTANA

**AUTHORIZED PERSON**

**05/01/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date