

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000130909

Entity Name: HA-LEN BYRD CENTER, LLC

Current Principal Place of Business:

4400 BISCAYNE BOULEVARD, SUITE 950
MIAMI, FL 33137

Current Mailing Address:

4400 BISCAYNE BOULEVARD, SUITE 950
MIAMI, FL 33137

FEI Number: 27-4398369

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HALPRYN, GLENN L
4400 BISCAYNE BOULEVARD
SUITE 950
MIAMI, FL 33137 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
Name HALPRYN, GLENN L
Address 4400 BISCAYNE BLVD., SUITE 950
City-State-Zip: MIAMI FL 33137

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: GLENN L. HALPRYN

MANAGER

02/25/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date