| FEI Number: Name and A | 45-2013230 ddress of Current Registered Agent: | | Certificate of Status D | esired: No | |
|---------------------------|--|-------------------------|--|------------|--|
| | TAS, LEA L 32 E COMMERCIAL BLVD #120 LAUDERDALE, FL 33308 US | | | | |
| The above named | entity submits this statement for the purpose of changing its | registered office or re | egistered agent, or both, in the State o | f Florida. | |
| SIGNATURE | : ATTAS LEA LILY | | | 03/14/2017 | |
| | Electronic Signature of Registered Agent | | | Date | |
| Authorized F | Person(s) Detail : | | | | |
| Title | MGR | Title | MGR | | |
| Name | OZ, ACHAIZ | Name | ATTAS, LEA LILY | | |

Address

City-State-Zip:

| 2017 FLORIDA | LIMITED LIABILITY | COMPANY | ANNUAL REPORT | |
|--------------|-------------------|---------|---------------|--|
| | | | | |

DOCUMENT# L11000035686

Entity Name: 110 NE 5TH STREET POMPANO, LLC

Current Principal Place of Business:

3032 E COMMERCIAL BLVD #120 FT. LAUDERDALE, FL 33308

Current Mailing Address:

3032 E COMMERCIAL BLVD #120 FT. LAUDERDALE. FL 33308

FE

Na

3032 E COMMERCIAL BLVD #120

City-State-Zip: FT. LAUDERDALE FL 33308

Address

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: ATTAS, LEA LILY

MGR

03/14/2017

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 14, 2017 Secretary of State CC6645254453

3032 E COMMERCIAL BLVD #120

FT. LAUDERDALE FL 33308

Date