

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000132320

**Entity Name:** SOBEL NEW HORIZONS 2011, LLC

**Current Principal Place of Business:**

ONE COLLINS AVENUE  
UNIT #408  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

225 MILLBURN AVENUE  
SUITE 202  
MILLBURN, NJ 07041 US

**FEI Number:** 45-3853627

**Certificate of Status Desired:** No

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

SOBEL, CLIFFORD M  
ONE COLLINS AVENUE  
UNIT #408  
MIAMI BEACH, FL 33139 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	MGRM
Name	SOBEL, JONATHAN
Address	44 SPRING HOLLOW ROAD
City-State-Zip:	FAR HILLS NJ 07931
Title	MGR
Name	SOBEL, SCOTT
Address	53 N. MOORE STREET APT 7D
City-State-Zip:	NEW YORK NY 10013

Title	MGR
Name	KAPLAN, JULIE SOBEL
Address	31 MOUNTAIN RIDGE DRIVE
City-State-Zip:	LIVINGSTON NJ 07039

*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:** JONATHAN SOBEL

**MEMBER**

**03/21/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date