

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000020773

Entity Name: LMB INVESTMENTS LLC**Current Principal Place of Business:**1450 BRICKELL AVE
SUITE 2600
MIAMI, FL 33131**Current Mailing Address:**1001 BRICKELL BAY DRIVE
SUITE 1202
MIAMI, FL 33131 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES INC.
1200 SOUTH PINE ISLANDS ROAD
PLANTATION, FL 33324 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:** PETER SOUZA

04/28/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER, AUTHORIZED MEMBER
Name LWM STRATEGIC FUND LTD.
Address 1450 BRICKELL AVE
SUITE 2600
City-State-Zip: MIAMI FL 33131

Title AUTHORIZED OFFICER
Name HERMANN, EMMANUEL
Address 1450 BRICKELL AVE
SUITE 2600
City-State-Zip: MIAMI FL 33131

Title AUTHORIZED OFFICER
Name DE SABRIT, STEPHAN
Address 1450 BRICKELL AVE
SUITE 2600
City-State-Zip: MIAMI FL 33131

Title AUTHORIZED OFFICER
Name SOUZA, ALESSANDRA
Address 1450 BRICKELL AVE
SUITE 2600
City-State-Zip: MIAMI FL 33131

Title AUTHORIZED OFFICER
Name CAMARGO, TAINA
Address 1450 BRICKELL AVE
SUITE 2600
City-State-Zip: MIAMI FL 33131

Title AUTHORIZED OFFICER
Name GANEM, MARCELO
Address 1450 BRICKELL AVE
SUITE 2600
City-State-Zip: MIAMI FL 33131

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: PAULO MIRANDA

04/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date