

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000113713

Entity Name: BBX CAPITAL PARTNERS, LLC**Current Principal Place of Business:**401 E LAS OLAS BLVD
STE 800
FT LAUDERDALE, FL 33301**Current Mailing Address:**401 E LAS OLAS BLVD
STE 800
FT LAUDERDALE, FL 33301 US**FEI Number:** 46-3401628**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEARNS WEAVER MILLER, PA
MUSEUM TOWER
150 WEST FLAGLER STREET SUITE 2200
MIAMI, FL 33130 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:** ALISON MILLER

03/20/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AUTHORIZED MEMBER
Name BBX CAPITAL CORPORATION
Address 401 E LAS OLAS BLVD
STE 800
City-State-Zip: FT LAUDERDALE FL 33301

Title MANAGER
Name ABDO, JOHN
Address 401 E LAS OLAS BLVD
STE 800
City-State-Zip: FT LAUDERDALE FL 33301

Title MANAGER, PRESIDENT
Name LEVAN, JARETT
Address 401 E LAS OLAS BLVD
STE 800
City-State-Zip: FT LAUDERDALE FL 33301

Title MANAGER
Name WISE, SETH
Address 401 E LAS OLAS BLVD
STE 800
City-State-Zip: FT LAUDERDALE FL 33301

Title TREASURER
Name LOPEZ, RAY
Address 401 E LAS OLAS BLVD
STE 800
City-State-Zip: FT LAUDERDALE FL 33301

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: RAY LOPEZ

TREASURER

03/20/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date