

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000103744

**Entity Name:** 4201 NE 2ND AVE LLC

**Current Principal Place of Business:**

C/O HELM EQUITIES LLC  
150 BROADWAY, SUITE 800  
NEW YORK, NY 10038

**Current Mailing Address:**

C/O HELM EQUITIES LLC  
150 BROADWAY, SUITE 800  
NEW YORK, NY 10038

**FEI Number:** 47-1228402

**Certificate of Status Desired:** No

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

COGENCY GLOBAL INC.  
115 NORTH CALHOUN ST.  
SUITE 4  
TALLAHASSEE, FL 32301 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 ESCAVA, DAVID  
Address 150 BROADWAY, SUITE 800  
City-State-Zip: NEW YORK NY 10038

Title MGR  
Name HOROVITS, AYAL  
Address 150 BROADWAY, SUITE 800  
City-State-Zip: NEW YORK NY 10038

Title AP  
Name SCHIAVI, SONYA  
Address C/O HELM EQUITIES LLC  
150 BROADWAY, SUITE 800  
City-State-Zip: NEW YORK NY 10038

*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:** SONYA SCHIAVI

05/01/2024

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

\_\_\_\_\_  
Date