

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000080383

Entity Name: QFT LAKE PLACID LLC

Current Principal Place of Business:

20 WEST 55TH STREET 6TH FLOOR
C/O BENENSON
NEW YORK, NY 10019

Current Mailing Address:

20 WEST 55TH STREET 6TH FLOOR
C/O BENENSON
NEW YORK, NY 10019 US

FEI Number: 47-4205217

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND 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: LISA QUATTROCCHI

01/16/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name NICOLE QUATTROCCHI, CO-TRUSTEE
Address 20 WEST 55TH STREET 6TH FLOOR
City-State-Zip: NEW YORK NY 10019

Title MBR, AUTHORIZED MEMBER
Name NICOLE QUATTROCCHI, CO-TRUSTEE
Address 20 WEST 55TH STREET 6TH FLOOR
City-State-Zip: NEW YORK NY 10019

Title MGR
Name ALBERT FLEISCHMAN, CO-TRUSTEE
Address 20 WEST 55TH STREET 6TH FLOOR
City-State-Zip: NEW YORK NY 10019

Title MBR, MANAGER
Name ALBERT FLEISCHMAN, CO-TRUSTEE
Address 20 WEST 55TH STREET 6TH FLOOR
City-State-Zip: NEW YORK NY 10019

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: NICOLE QUATTROCCHI

TRUSTEE

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date