

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000131169

Entity Name: L5NDF, LLC**Current Principal Place of Business:**48 NW 25TH ST
SUITE 105
MIAMI, FL 33127**Current Mailing Address:**48 NW 25TH ST
SUITE 105
MIAMI, FL 33127 US**FEI Number:** 47-4746673**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SEPIN, GERSON
48 NW 25TH ST
SUITE 105
MIAMI, FL 33127 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 AMBR
Name GERSON SEPIN & JULIE SEPIN, TBE
Address 5013 DELAWARE AVE
City-State-Zip: MIAMI BEACH FL 33140

Title AMBR
Name GILDERMAN FAMILY LLLP
Address 7940 BISCAYNE POINT CIRCLE
City-State-Zip: MIAMI BEACH FL 33141

Title AMBR
Name DAVID MORET & TRACY MORET, TBE
Address 4631 N. MERIDIAN AVE
City-State-Zip: MIAMI BEACH FL 33140

Title AMBR
Name STEVEN HURWITZ & AMY HURWITZ,
TBE
Address 1211 102ND ST
City-State-Zip: BAY HARBOR ISLANDS FL 33154

Title AMBR
Name PATRICK LEE & LESLY LEE, TBE
Address 1122 NE 97TH ST
City-State-Zip: MIAMI SHORES FL 33138

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: GERSON SEPIN

AMBR

03/01/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date