

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000015150

**Entity Name:** DORAL COSTA MANAGER, LLC

**Current Principal Place of Business:**

18205 BISCAYNE BLVD  
SUITE 2202  
AVENTURA, FL 33160

**Current Mailing Address:**

18205 BISCAYNE BLVD  
SUITE 2202  
AVENTURA, FL 33160

**FEI Number:** 81-1175668

**Certificate of Status Desired:** No

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

LINKEWER, JORGE  
18205 BISCAYNE BLVD  
SUITE 2202  
AVENTURA, FL 33160 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 GROSFELD, MARIO  
Address 18205 BISCAYNE BLVD., SUITE 2202  
City-State-Zip: AVENTURA FL 33160

Title MGR  
Name LINKEWER, JORGE  
Address 18205 BISCAYNE BLVD., SUITE 2202  
City-State-Zip: AVENTURA FL 33160

*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:** JORGE LINKEWER

RA

03/21/2024

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

\_\_\_\_\_  
Date