

2024 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L17000177532

Entity Name: LIBERTY SQUARE PHASE NINE DEVELOPER, LLC

Current Principal Place of Business:

2850 TIGERTAIL AVE, SUITE 800
MIAMI, FL 33133

Current Mailing Address:

2850 TIGERTAIL AVE, SUITE 800
MIAMI, FL 33133 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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: CARLOS M ALVAREZ, SPECIAL SECRETARY

06/20/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name RUDG, LLC
Address 2850 TIGERTAIL AVE, SUITE 800
City-State-Zip: MIAMI FL 33133

Title PRESIDENT
Name PEREZ, JORGE M
Address 2850 TIGERTAIL AVE, SUITE 800
City-State-Zip: MIAMI FL 33133

Title VP
Name PEREZ, JON PAUL
Address 2850 TIGERTAIL AVE, SUITE 800
City-State-Zip: MIAMI FL 33133

Title VP
Name ALLEN, MATTHEW J
Address 2850 TIGERTAIL AVE, SUITE 800
City-State-Zip: MIAMI FL 33133

Title VP
Name MILO, ALBERTO JR.
Address 2850 TIGERTAIL AVE, SUITE 800
City-State-Zip: MIAMI FL 33133

Title VP
Name GERBER, BEN
Address 2850 TIGERTAIL AVE, SUITE 800
City-State-Zip: MIAMI FL 33133

Title VICE
PRESIDENT/TREASURER/SECRETAR
Y
Name DEL POZZO, TONY
Address 2850 TIGERTAIL AVE, SUITE 800
City-State-Zip: MIAMI FL 33133

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: CARLOS M ALVAREZ

ATTORNEY-IN-FACT

06/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date