

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000041876

Entity Name: HIALEAH PURA VIDA APARTMENTS, LLC

Current Principal Place of Business:

2800 PONCE DE LEON BLVD
SUITE1160
CORAL GABLES, FL 33134

Current Mailing Address:

2800 PONCE DE LEON BLVD
SUITE1160
CORAL GABLES, FL 33134 US

FEI Number: 82-4522297

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VICTOR BROWN
2800 PONCE DE LEON BLVD
SUITE 1160
CORAL GABLES, FL 33134 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 MBR
Name PV RESIDENTIAL HOLDINGS, LLC
Address 2800 PONCE DE LEON BLVD
SUITE1160
City-State-Zip: CORAL GABLES FL 33134

Title AUTHORIZED REPRESENTATIVE
Name BLUMENTHAL, STEPHEN
Address 2800 PONCE DE LEON BLVD
SUITE1160
City-State-Zip: CORAL GABLES FL 33134

Title AUTHORIZED REPRESENTATIVE
Name WOHL, MICHAEL
Address 2800 PONCE DE LEON BLVD
SUITE1160
City-State-Zip: CORAL GABLES FL 33134

Title AUTHORIZED REPRESENTATIVE
Name BROWN, DAVID
Address 2800 PONCE DE LEON BLVD
SUITE1160
City-State-Zip: CORAL GABLES FL 33134

Title AUTHORIZED REPRESENTATIVE
Name BROWN, VICTOR
Address 2800 PONCE DE LEON BLVD
SUITE1160
City-State-Zip: CORAL GABLES FL 33134

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: VICTOR BROWN

REGISTER AGENT

01/31/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date