2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000092657

Entity Name: ARCADIAN HOLDINGS 167, LLC

Current Principal Place of Business:

7900 GLADES ROAD SUITE 600 BOCA RATON, FL 33434

Current Mailing Address:

7900 GLADES ROAD SUITE 600 BOCA RATON, FL 33434 US

FEI Number: 38-4112956

Name and Address of Current Registered Agent:

WEINER, IAN 7900 GLADES ROAD SUITE 600 BOCA RATON, FL 33434 US Certificate of Status Desired: No

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.

IAN WEINER			03/20/2024
Electronic Signature of Registered Agent			Date
Person(s) Detail :			
AP	Title	MGR	
WEINER, IAN	Name	PEBB ARCADIAN, LLC	
7900 GLADES ROAD SUITE 600	Address	7900 GLADES ROAD SUITE 60	00
BOCA RATON FL 33434	City-State-Zip:	BOCA RATON FL 33434	
AP	Title	AUTHORIZED MEMBER	
ROSEN, AUSTIN	Name	YO LE SO FLO, LLC	
215 SE 8TH AVE. #2760	Address	7417 ESTRELLA CIRCLE	
FT. LAUDERDALE FL 33301	City-State-Zip:	BOCA RATON FL 33433	
	Electronic Signature of Registered Agent erson(s) Detail : AP WEINER, IAN 7900 GLADES ROAD SUITE 600 BOCA RATON FL 33434 AP ROSEN, AUSTIN 215 SE 8TH AVE. #2760	Electronic Signature of Registered Agent erson(s) Detail : AP Title WEINER, IAN Name 7900 GLADES ROAD SUITE 600 Address BOCA RATON FL 33434 City-State-Zip: AP Title ROSEN, AUSTIN Name 215 SE 8TH AVE. #2760 Address	Electronic Signature of Registered Agent erson(s) Detail : AP Title MGR WEINER, IAN Name PEBB ARCADIAN, LLC 7900 GLADES ROAD SUITE 600 Address 7900 GLADES ROAD SUITE 600 BOCA RATON FL 33434 City-State-Zip: BOCA RATON FL 33434 AP Title AUTHORIZED MEMBER ROSEN, AUSTIN Name YO LE SO FLO, LLC 215 SE 8TH AVE. #2760 Address 7417 ESTRELLA CIRCLE

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: IAN WEINER

AP

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 20, 2024 Secretary of State 4676988205CC