

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000211239

**Entity Name:** NE 8 GARDENS LLC

**Current Principal Place of Business:**

199 LEE AVE  
1085  
BROOKLYN, NY 11211

**Current Mailing Address:**

199 LEE AVE  
1085  
BROOKLYN, NY 11211

**FEI Number:** 86-3688741

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC.  
7901 4TH ST N  
300  
ST PETERSBURG, FL 33702 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	Title	MEMBER
Name	LEBOWITZ, SHAYE	Name	GREEN, JUDA
Address	199 LEE AVE STE 1085	Address	199 LEE AVE 1085
City-State-Zip:	BROOKLYN NY 11211	City-State-Zip:	BROOKLYN NY 11211

*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:** SHAYE LEBOWITZ

**MEMBER**

**02/05/2023**

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

\_\_\_\_\_  
Date