

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000026803

Entity Name: AVENTURA OFFICE CENTER LLC

Current Principal Place of Business:

275 189TH TERRACE
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

275 189TH TERRACE
SUNNY ISLES BEACH, FL 33160 US

FEI Number: 35-2750237

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FEINBERG, JEFFREY
4651 SHERIDAN STREET
SUITE 200
HOLLYWOOD, FL 33021 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 AMBR
Name COHEN, YAKOV
Address 275 189TH TERR
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title AMBR
Name COHEN, CHERYL
Address 275 189TH TERR
City-State-Zip: SUNNY ISLES BEACH 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: YAKOV COHEN

MGR

02/06/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date