

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000323185

Entity Name: 1529 SE, LLC

Current Principal Place of Business:

1529 SE 2ND CT
FORT LAUDERDALE, FL 33301

Current Mailing Address:

1000 BALLPARK WAY SUITE 302
ARLINGTON, TX 76011

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
155 OFFICE PLAZA DRIVE -- 1ST FLOOR
TALLAHASSEE, FL 32301 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 | MGR | Title | MGR |
| Name | ORAKPO, BRIAN | Name | ORAKPO, BITURA |
| Address | 11615 MUSKET RIM ST | Address | 11615 MUSKET RIM ST |
| City-State-Zip: | AUSTIN TX 78738 | City-State-Zip: | AUSTIN TX 78738 |

Title AUTHORIZED REPRESENTATIVE
 Name QUISENBERRY, CHERYL
 Address 1000 BALLPARK WAY SUITE 302
 City-State-Zip: ARLINGTON TX 76011

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: CHERYL QUISENBERRY

**AUTHORIZED
REPRESENTATIVE**

02/16/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date