2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000343404

Entity Name: 645 NE 9TH AVE, LLC

Current Principal Place of Business:

197 ROYAL PALM DRIVE FORT LAUDERDALE. FL 33301

Current Mailing Address:

197 ROYAL PALM DRIVE FORT LAUDERDALE. FL 33301 US

FEI Number: 88-3701188

Name and Address of Current Registered Agent:

KURTEN, LEONHARD 197 ROYAL PALM DRIVE FORT LAUDERDALE, FL 33301 US

FILED Apr 22, 2024 Secretary of State 1162634122CC

Certificate of Status Desired: Yes

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 | | | [|
|-------------------------------|---------|--|-----------------|--------------------------|---|
| Authorized Person(s) Detail : | | | | | |
| Title | I | MM | Title | ММ | |
| Name | I | KURTEN, LEONHARD | Name | KURTEN, IRMTRAUD | |
| Address | | 197 ROYAL PALM DRIVE | Address | 197 ROYAL PALM DRIVE | |
| City-State- | -Zip: I | FORT LAUDERDALE FL 33301 | City-State-Zip: | FORT LAUDERDALE FL 33301 | |
| Title | I | MGR | | | |
| Name | I | KURTEN LOBENBERG, LEONIE | | | |
| Address | | 197 ROYAL PALM DRIVE | | | |
| City-State- | -Zip: I | FORT LAUDERDALE FL 33301 | | | |
| | | | | | |

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: LEONHARD KURTEN

MM

Date

Electronic Signature of Signing Authorized Person(s) Detail