

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000075174

**Entity Name:** AVIV LIVING LLC

**Current Principal Place of Business:**

4953 SW 32ND AVN  
FORT LAUDERDALE, FL 33312

**Current Mailing Address:**

4952 SW 32ND AVN  
FORT LAUDERDALE, FL 33312 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

RENYI, MICHAEL  
4952 SW 32ND AVN  
FORT LAUDERDALE, FL 33312 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 PR  
Name AVIV, LIN W  
Address 4952 SW 32ND AVE  
140  
City-State-Zip: FORT LAUDERDALE FL 33312

Title VP  
Name AVIV, LIN  
Address 450 NE 5TH STREET APT 646  
City-State-Zip: 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:** LIN AVIV

MRS.

03/18/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date