#### 2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M0800003704

#### Entity Name: T-C 701 BRICKELL LLC

#### **Current Principal Place of Business:**

730 THIRD AVENUE NEW YORK, NY 10017

#### **Current Mailing Address:**

730 THIRD AVENUE NEW YORK, NY 10017 US

#### FEI Number: 26-3091608

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

## FILED Apr 25, 2023 Secretary of State 7756318540CC

Certificate of Status Desired: No

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	AUTHORIZED SIGNATORY	Title	AUTHORIZED SIGNATORY
Name	RAMOS, JANET	Name	BAIR, SHARON
Address	730 THIRD AVENUE	Address	730 THIRD AVENUE
City-State-Zip:	NEW YORK NY 10017	City-State-Zip:	NEW YORK NY 10017
Title Name Address City-State-Zip:	AUTHORIZED MEMBER TEACHERS INSURANCE AND ANNUITY ASSOCIATION OF AMERICA 730 THIRD AVENUE NEW YORK NY 10017	Title Name Address City-State-Zip:	AUTHORIZED REPRESENTATIVE COHEN, DONNA 730 THIRD AVENUE NEW YORK NY 10017
Title Name Address City-State-Zip:	AUTHORIZED REPRESENTATIVE CORNUKE, JOHN 730 THIRD AVENUE NEW YORK NY 10017	Title Name Address City-State-Zip:	AUTHORIZED REPRESENTATIVE GIRALDO, RANDY 730 THIRD AVENUE NEW YORK NY 10017
Title Name Address City-State-Zip:	AUTHORIZED REPRESENTATIVE JOSEPH, JILLIAN 730 THIRD AVENUE NEW YORK NY 10017	Title Name Address City-State-Zip:	AUTHORIZED REPRESENTATIVE MARTIN, MANUEL 501 BRICKELL KEY DRIVE MIAMI FL 33131
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## Continues on page 2

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: WAYNE A AGARD

SECRETARY

04/25/2023

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

# Authorized Person(s) Detail Continued :

Title	AUTHORIZED REPRESENTATIVE	Title	AUTHORIZED REPRESENTATIVE
Name	MILLER, NANCY	Name	MILLER, WILLIAM
Address	730 THIRD AVENUE	Address	730 THIRD AVENUE
City-State-Zip:	NEW YORK NY 10017	City-State-Zip:	NEW YORK NY 10017
Title	AUTHORIZED REPRESENTATIVE	Title	AUTHORIZED SIGNER
Name	ROLLINS, TODD	Name	HORAN, CHELSEY
Address	730 THIRD AVENUE	Address	730 THIRD AVENUE
City-State-Zip:	NEW YORK NY 10017	City-State-Zip:	NEW YORK NY 10017
Title	AUTHORIZED REPRESENTATIVE	Title	AUTHORIZED REPRESENTATIVE
Name	RUSSO, CHARLES	Name	BOAN, RYAN
Address	501 BRICKELL KEY DRIVE	Address	730 THIRD AVENUE
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	NEW YORK NY 10017
		Title	SECRETARY
Title	AUTHORIZED REPRESENTATIVE		
Name	CHAPERON, JULIEN	Name	AGARD, WAYNE A
Address	730 THIRD AVENUE	Address	730 THIRD AVENUE
City-State-Zip:	NEW YORK NY 10017	City-State-Zip:	NEW YORK NY 10017
Title	AUTHORIZED REPRESENTATIVE	Title	AUTHORIZED REPRESENTATIVE
Name	NEGRON, PATRICIA	Name	INOA-MONJE, CAROLYN
Address	730 THIRD AVENUE	Address	730 THIRD AVENUE
	NEW YORK NY 10017	City-State-Zip:	NEW YORK NY 10017
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