

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000016785

**Entity Name:** THREEFOLD CARIBBEAN VILLAS PROPERTY HOLDINGS, LLC

**FILED**  
**Apr 30, 2024**  
**Secretary of State**  
**1011646466CC**

**Current Principal Place of Business:**

C/O ERRA REGISTERED AGENTS, LLC  
2601 SOUTH BAYSHORE DRIVE 18TH FLOOR  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

C/O ERRA REGISTERED AGENTS, LLC  
2601 SOUTH BAYSHORE DRIVE 18TH FLOOR  
COCONUT GROVE, FL 33133 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

ERRA REGISTERED AGENTS, LLC  
2601 SOUTH BAYSHORE DRIVE  
18TH FLOOR  
COCONUT GROVE, FL 33133 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: SANTIAGO ELJAIK**

**04/30/2024**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED REPRESENTATIVE  
Name ELJAIK III, SANTIAGO  
Address 2601 SOUTH BAYSHORE DRIVE  
18TH FLOOR  
City-State-Zip: COCONUT GROVE FL 33133

Title MMBR  
Name THREEFOLD CARIBBEAN VILLAS  
MEMBER LLC  
Address C/O ERRA REGISTERED AGENTS,  
LLC  
2601 SOUTH BAYSHORE DRIVE 18TH  
City-State-Zip: COCONUT GROVE FL 33133

*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: ELJAIK III , SANTIAGO**

**AUTHORIZED  
REPRESENTATIVE**

**04/30/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date