

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000006231

**Entity Name:** 1775 BISCAYNE L/CAL LLC

**Current Principal Place of Business:**

1325 MORRIS DRIVE  
SUITE 100  
CHESTERBROOK, PA 19087

**Current Mailing Address:**

1325 MORRIS DRIVE  
SUITE 100  
CHESTERBROOK, PA 19087 US

**FEI Number:** 88-1890045

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 AUTHORIZED MEMBER  
Name 1775 BISCAYNE APARTMENTS LLC  
Address 1325 MORRIS DRIVE  
SUITE 100  
City-State-Zip: CHESTERBROOK PA 19087

Title MGR  
Name TORTORA, ANTHONY  
Address ONE PENN PLAZA, SUITE 1801  
City-State-Zip: NEW YORK NY 10119

Title AP  
Name LANDAU, SETH R  
Address 1325 MORRIS DRIVE  
SUITE 100  
City-State-Zip: CHESTERBROOK PA 19087

Title AP  
Name DEGLER, KAREN L  
Address 1325 MORRIS DRIVE  
SUITE 100  
City-State-Zip: CHESTERBROOK PA 19087

*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:** KAREN DEGLER

**AUTHORIZED PERSON**

**02/20/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date