

**2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L20000353834

**Entity Name:** JEBS 1605 LLC

**Current Principal Place of Business:**

10155 COLLINS AVENUE, SUITE 1605  
BAL HARBOUR, FL 33154

**Current Mailing Address:**

10155 COLLINS AVENUE, SUITE 1605  
BAL HARBOUR, FL 33154 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ASHER, GLENN  
80 SW 8TH ST, SUITE 200  
MIAMI, FL 33130 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:** GLENN ASHER

01/15/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LEVINE, JENNIFER  
Address 10101 COLLINS AVENUE, APT 18E  
City-State-Zip: BAL HARBOUR FL 33154

Title AMBR  
Name LEVINE, BROOKE  
Address 3 COTTONWOOD LANE  
City-State-Zip: SUFFERN NY 10901

Title AMBR  
Name LEVINE, EMILY  
Address 3 COTTONWOOD LANE  
City-State-Zip: SUFFERN NY 10901

Title AMBR  
Name LEVINE, SCOTT  
Address 3 COTTONWOOD LANE  
City-State-Zip: SUFFERN NY 10901

Title AMBR  
Name LEVINE, JACK  
Address 3 COTTONWOOD LANE  
City-State-Zip: SUFFERN NY 10901

*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:** JENNIFER LEVINE

MGR

01/15/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date