

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000364703

**Entity Name:** TROPICS VOLLEYBALL CLUB LLC

**Current Principal Place of Business:**

2201 SOLE MIA SQ LN.  
APT 612  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

2201 SOLE MIA SQ LN.  
APT 612  
NORTH MIAMI, FL 33181 US

**FEI Number:** 85-4111283

**Certificate of Status Desired:** No

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

ERTTY, BRENO P  
2201 SOLE MIA SQ LN  
APT 612  
NORTH MIAMI, FL 33181 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 MGR  
Name ERTTY, BRENO P  
Address 2201 SOLE MIA SQ LN  
APT 612  
City-State-Zip: NORTH MIAMI FL 33181

Title MGR  
Name KOSYDOR, KELLI A  
Address 4920 SW 124TH AVE  
APT 402  
City-State-Zip: MIRAMAR FL 33027

*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:** ERTTY , BRENO P

MGR

04/25/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date