

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000493097

**Entity Name:** TRYUMPH QOF LLC

**Current Principal Place of Business:**

2020 BAYSHORE DRIVE, UNIT #3807  
MIAMI, FL 33131

**Current Mailing Address:**

2020 BAYSHORE DRIVE, UNIT #3807  
MIAMI, FL 33131 US

**FEI Number:** 92-1118376

**Certificate of Status Desired:** No

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

THOMAS G. SHERMAN, P.A.  
90 ALMERIA AVENUE  
CORAL GABLES, FL 33134 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	Title	AUTHORIZED PERSON
Name	TRYUMPH LLC	Name	ARBONA, YAIMA
Address	2020 BAYSHORE DRIVE, UNIT #3807	Address	936 SW 1ST AVE. # 133
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33130

*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:** YAIMA ARBONA

**AUTHORIZED PERSON**

**04/10/2023**

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

\_\_\_\_\_  
Date