#### 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 es; and oatl that

SIGNATURE: KATHY KING

ADMINISTRATIVE ASSISTANT

03/06/2024

Date

Date

# 2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# M21000012675

### Entity Name: DC CLEARWATER BEACH 1 OPERATIONS, LLC

### **Current Principal Place of Business:**

5314 RIVER RUN DR., STE. 330 PROVO, UT 84604

#### **Current Mailing Address:**

5314 RIVER RUN DR., STE. 330 PROVO. UT 84604 US

### FEI Number: 87-2544064

# Name and Address of Current Registered Agent:

UNIVERSAL REGISTERED AGENTS, INC. 1317 CALIFORNIA ST. TALLAHASSEE, FL 32304 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

#### Authorized Person(s) Detail :

Title	MBR	Title	AP
Name	DC OPERATIONS, INC.	Name	RICKS, ADAM
Address	5314 RIVER RUN DR., STE. 330	Address	5314 RIVER RUN DR., STE. 330
City-State-Zip:	PROVO UT 84604	City-State-Zip:	PROVO UT 84604

n; that I am a managing member or manager of the limited liability company or the receiver or truste	ee empowered to execute this report as required by Chapter	r 605, Florida Statute
my name appears above, or on an attachment with all other like empowered.		
GNATURE: KATHY KING		03/06/2

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Mar 06, 2024 Secretary of State 5333624507CC

Certificate of Status Desired: No