that my name appears above, or on an attachment with all other like empowered. SIGNATURE: MARC SCHMULIAN

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

Electronic Signature of Signing Authorized Person(s) Detail

# DOCUMENT# L13000111821

Entity Name: S2 SUNNY ISLES DEVELOPMENT GROUP, LLC

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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

18851 NE 29TH AVENUE **SUITE 1011** AVENTURA, FL 33180

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

18851 NE 29TH AVENUE **SUITE 1011** AVENTURA, FL 33180

#### FEI Number: 46-3415685

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

SCHMULIAN, MARC D 18851 NE 29TH AVENUE **SUITE 1011** AVENTURA, FL 33180 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 MGR Title MGR Name SCHMULIAN, MARC D Name STIVELMAN, JACQUES C 18851 NE 29TH AVENUE, SUITE 1011 Address 18851 NE 29TH AVENUE, SUITE 1011 Address City-State-Zip: AVENTURA FL 33180 AVENTURA FL 33180 City-State-Zip:

Certificate of Status Desired: No

03/09/2023 MANAGER

Date

Mar 09, 2023 Secretary of State 4455865853CC

FILED

Date