

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000246516

Entity Name: CIJA 12, LLC

Current Principal Place of Business:

2020 PONCE DE LEON BLVD
SUITE 1205 B
CORAL GABLES, FL 33134

Current Mailing Address:

2020 PONCE DE LEON BLVD
SUITE 1205 B
CORAL GABLES, FL 33134

FEI Number: 87-1078302

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VINA, GEORGE F
2020 PONCE DE LEON BLVD
SUITE 1205 B
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
Name MORALES BRAVO, GUILLERMO A
Address 2020 PONCE DE LEON BLVD SUITE 1205 B
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name MORALES, MARIA CRISTINA
Address 2020 PONCE DE LEON BLVD SUITE 1205 B
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name MORALES, MARIA IGNACIA
Address 2020 PONCE DE LEON BLVD SUITE 1205 B
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name MORALES, MARIA JOSEFINA
Address 2020 PONCE DE LEON BLVD SUITE 1205 B
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name MORALES, MARIA DE LOS ANGELES
Address 2020 PONCE DE LEON BLVD SUITE 1205 B
City-State-Zip: CORAL GABLES FL 33134

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: GUILLERMO MORALES BRAVO

MANAGER

03/07/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date