

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000275740

**Entity Name:** 12AVE2HOWARD, LLC

**Current Principal Place of Business:**

6435 SABLE RIDGE LANE  
NAPLES, FL 34109

**Current Mailing Address:**

6435 SABLE RIDGE LANE  
NAPLES, FL 34109 UN

**FEI Number:** 87-1210575

**Certificate of Status Desired:** No

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

DAVID S GED PA  
7955 AIRPORT PULLING ROAD N  
202  
NAPLES, FL 34109 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	MGR
Name	BERRY, AIMEE	Name	LAVALLIE, CHRISTINA
Address	5461 PARK ROAD	Address	6435 SABLE RIDGE LANE
City-State-Zip:	FORT MYERS FL 33908	City-State-Zip:	NAPLES FL 34109

*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:** BERRY, AIMEE

**MANAGER**

**05/08/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date