

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000115317

Entity Name: 1221 MANAGEMENT LLC**Current Principal Place of Business:**1221 BRICKELL AVE STE 2660
MIAMI, FL 33131**Current Mailing Address:**1221 BRICKELL AVE STE 2660
MIAMI, FL 33131**FEI Number:** 47-4490229**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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 MANAGER
Name STAZ, TOM
Address 1221 BRICKELL AVE STE 2660
City-State-Zip: MIAMI FL 33131

Title MANAGER
Name WOOD, JOSHUA
Address 1221 BRICKELL AVE STE 2660
City-State-Zip: MIAMI FL 33131

Title CEO, DIRECTOR
Name STAZ, THOMAS
Address 1221 BRICKELL AVE STE 2660
City-State-Zip: MIAMI FL 33131

Title CFO
Name TOLZIEN, JAMES R.
Address 1221 BRICKELL AVE STE 2660
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name SICILIAN, JOHN
Address 1221 BRICKELL AVE STE 2660
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name WOOD, JOSHUA
Address 1221 BRICKELL AVE STE 2660
City-State-Zip: MIAMI FL 33131

Title DIRECTOR
Name TOLZIEN, JAMES R.
Address 1221 BRICKELL AVE STE 2660
City-State-Zip: MIAMI FL 33131

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: JAMES R. TOLZIEN

CFO

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date