

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000178960

**Entity Name:** 14TH AND OCEAN 1C, LLC

**Current Principal Place of Business:**

440 SAWGRASS CORPORATE PARKWAY  
SUITE 210  
SUNRISE, FL 33325

**Current Mailing Address:**

440 SAWGRASS CORPORATE PARKWAY  
SUITE 210  
SUNRISE, FL 33325 US

**FEI Number:** 81-3985497

**Certificate of Status Desired:** Yes

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

BYNOE, SUDKHANUENG  
440 SAWGRASS CORPORATE PARKWAY  
SUITE 210  
SUNRISE, FL 33325 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 AUTHORIZED MEMBER  
Name YOKEUM, UAMPORN  
Address 440 SAWGRASS CORPORATE  
PARKWAY  
SUITE 210  
City-State-Zip: SUNRISE FL 33325

Title AUTHORIZED MEMBER  
Name YOKEUM, DAVID  
Address 440 SAWGRASS CORPORATE  
PARKWAY  
SUITE 210  
City-State-Zip: SUNRISE FL 33325

Title MANAGER  
Name BYNOE, SUDKHANUENG  
Address 440 SAWGRASS CORPORATE  
PARKWAY  
SUITE 210  
City-State-Zip: SUNRISE FL 33325

*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:** SUDKHANUENG BYNOE

**MANAGER**

**03/22/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date