

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000493762

**Entity Name:** SUNSHINE CITY MEDICAL AESTHETICS, LLC

**Current Principal Place of Business:**

2323 DOCTOR MARTIN LUTHER KING JUNIOR STREET NORTH  
ST. PETERSBURG, FL 33704

**Current Mailing Address:**

1184 24TH AVE,  
ST PETERSBURG, FL 33704 US

**FEI Number:** 87-3649615

**Certificate of Status Desired:** No

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

NEUMANN, ERIC  
1184 24TH AVE,  
ST PETERSBURG, FL 33074 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 AMBR  
Name NEUMANN, ERIC  
Address 1184 24TH AVE  
City-State-Zip: ST PETERSBURG FL 33074

Title AMBR  
Name NEUMANN, MANDY  
Address 1184 24TH AVE,, ,  
City-State-Zip: ST PETERSBURG FL 33074

*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:** ERIC NEUMANN

**MEMBER**

**04/18/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date