

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000059037

**Entity Name:** 4 FL SUNSHINE LLC

**Current Principal Place of Business:**

18 E 4TH ST STE 902  
CINICNNATI, OH 45202

**Current Mailing Address:**

18 E 4TH ST STE 902  
CINICNNATI, OH 45202

**FEI Number:** 88-1432128

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 OWNER MANAGEMENT INC.  
Address 18 E 4TH ST STE 902  
City-State-Zip: CINICNNATI OH 45202

*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:** DAVID WILLBRAND

**AUTHORIZED  
SIGNATORY**

04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date