

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000283314

**Entity Name:** 12 FL SUNSHINE LLC

**Current Principal Place of Business:**

18 E 4TH STREET, SUITE 902  
CINCINNATI, OH 45202

**Current Mailing Address:**

18 E 4TH STREET, SUITE 902  
CINCINNATI, OH 45202 US

**FEI Number:** 92-3722696

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 STREET, SUITE 902  
City-State-Zip: CINCINNATI 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**

04/27/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date