## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000120145

Entity Name: RES-WA OMH, LLC

**Current Principal Place of Business:** 

790 NW 107TH AVENUE, SUITE 400

790 NW 1071H AVENUE, SUITE 40

**Current Mailing Address:** 

790 NW 107TH AVENUE, SUITE 400 MIAMI, FL 33172 US

FEI Number: 27-3999357 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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

FILED Apr 15, 2015

**Secretary of State** 

CC4593786329

## Authorized Person(s) Detail:

Title MGRM

Name MULTIBANK 2009-I RES-ADC

VENTURE, LLC

Address 790 NW 107TH AVENUE, SUITE 400

City-State-Zip: MIAMI FL 33172

SIGNATURE: LORI BUCKLER

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.

AUTHORIZED SIGNATORY

04/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date