

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000134404

**FILED  
Mar 11, 2019  
Secretary of State  
8402955754CC**

**Entity Name:** ORTSAC INVESTMENTS #6, LLC

**Current Principal Place of Business:**

8800 NW 78TH CT  
TAMARAC, FL 33321

**Current Mailing Address:**

8800 NW 78TH CT  
TAMARAC, FL 33321 US

**FEI Number:** 45-3855402

**Certificate of Status Desired:** No

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

CASTRO, SOFIA  
8800 NW 78TH CT  
TAMARAC, FL 33321 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 ORTSAC MANAGEMENT, LLC  
Address 8800 NW 78TH CT  
City-State-Zip: TAMARAC FL 33321

Title MGRM  
Name CASTRO, ROBERT  
Address 8800 NW 78TH CT  
City-State-Zip: TAMARAC FL 33321

Title MGRM  
Name CASTRO, PRISCILLA  
Address 8800 NW 78TH CT  
City-State-Zip: TAMARAC FL 33321

Title MGRM  
Name CASTRO, SOFIA  
Address 8800 NW 78TH CT  
City-State-Zip: TAMARAC FL 33321

Title MGRM  
Name CASTRO, BRANDON  
Address 8800 NW 78TH CT  
City-State-Zip: TAMARAC FL 33321

*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:** SOFIA CASTRO

**MGR**

**03/11/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date