

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000134449

Entity Name: ORTSAC MANAGEMENT, LLC

Current Principal Place of Business:

10234 W STATE ROAD 84
DAVIE, FL 33324

Current Mailing Address:

10234 W STATE ROAD 84
DAVIE, FL 33324 US

FEI Number: 45-3855189

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTRO, SOFIA
10234 W STATE ROAD 84
DAVIE, 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

Authorized Person(s) Detail :

Title MGRM
Name CASTRO, ROBERT
Address 10234 W STATE ROAD 84
City-State-Zip: DAVIE FL 33324

Title MGRM
Name CASTRO, PRISCILLA
Address 10234 W STATE ROAD 84
City-State-Zip: DAVIE FL 33324

Title MGRM
Name CASTRO, SOFIA
Address 10234 W STATE ROAD 84
City-State-Zip: DAVIE FL 33324

Title MGRM
Name CASTRO, BRANDON
Address 10234 W STATE ROAD 84
City-State-Zip: DAVIE FL 33324

Title MGR
Name ORTSAC MANAGEMENT LLC
Address 10234 W STATE ROAD 84
City-State-Zip: DAVIE FL 33324

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

02/16/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date