#### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000058434

Entity Name: OASA, LLC

**FILED** Apr 30, 2016 **Secretary of State** CC7361551508

# **Current Principal Place of Business:**

40 SW 13TH STREET

703

MIAMI, FL 33130

# **Current Mailing Address:**

40 SW 13TH STREET 703

MIAMI, FL 33130 US

FEI Number: 90-0972136 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

TRIBEK CONSULTING, LLC 40 SW 13TH STREET MIAMI, FL 33130 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.

City-State-Zip:

MIAMI FL 33130

SIGNATURE:

City-State-Zip:

Electronic Signature of Registered Agent

Date

# **Authorized Person(s) Detail:**

Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	AGUIRRE, SANTIAGO	Name	AGUIRRE, OLGA V
Address	40 SW 13TH STREET	Address	40 SW 13TH STREET

Title **AUTHORIZED MEMBER** Title **AUTHORIZED MEMBER** Name AGUIRRE, ANA M Name AGUIRRE, ANDRES 40 SW 13TH STREET 40 SW 13TH STREET Address Address 703

MIAMI FL 33130

City-State-Zip: MIAMI FL 33130 City-State-Zip: MIAMI FL 33130

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.