## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000011130

Entity Name: OTI NL, LLC

May 01, 2020 **Secretary of State** 3771520317CC

**FILED** 

## **Current Principal Place of Business:**

807 W. MORSE BLVD.

SUITE 101

WINTER PARK, FL 32789

## **Current Mailing Address:**

807 W. MORSE BLVD.

SUITE 101

WINTER PARK, FL 32789 US

FEI Number: 61-1731021 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

FISHER, TREY 807 W. MORSE BLVD. SUITE 101 WINTER PARK, FL 32789 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: TREY FISHER 05/01/2020

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **PRES** Title **CFO** 

BRANNEN, CHANCE Name Name MILLER, R GABE CFO 807 WEST MORSE BLVD 807 WEST MORSE BLVD Address Address

SUITE 101 SUITE 101

City-State-Zip: WINTER PARK FL 32789 City-State-Zip: WINTER PARK FL 32789

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.

Electronic Signature of Signing Authorized Person(s) Detail