

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000138408

Entity Name: OXBRIDGE SILVERMAN, LLC

Current Principal Place of Business:

2525 PONCE DE LEON BLVD.
#300
CORAL GABLES, FL 33134

Current Mailing Address:

PO BOX 143406
CORAL GABLES, 33114 UN

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCPHILLIPS LAW FIRM PA
2525 PONCE DE LEON BLVD.
#300
CORAL GABLES, FL 33134 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 AUTHORIZED REPRESENTATIVE

Name MCPHILLIPS, FRANK

Address 2525 PONCE DE LEON BLVD.
#300

City-State-Zip: CORAL GABLES FL 33134

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: FRANK MCPHILLIPS

AGENT

04/07/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date