

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000117138

**Entity Name:** OAPP SUNSET MEDICAL PLAZA, LLC

**Current Principal Place of Business:**

300 REDWOOD LANE  
KEY BISCAVNE, FL 33149

**Current Mailing Address:**

300 REDWOOD LANE  
KEY BISCAVNE, FL 33149 US

**FEI Number:** 47-4505135

**Certificate of Status Desired:** No

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

AGI REGISTERED AGENTS, INC.  
1000 BRICKELL AVENUE  
SUITE 300  
MIAMI, FL 33131 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	Title	MGR
Name	PIETRI, OSCAR ALFREDO	Name	PIETRI, JOSE ANTONIO
Address	300 REDWOOD LANE	Address	300 REDWOOD LANE
City-State-Zip:	KEY BISCAVNE FL 33149	City-State-Zip:	KEY BISCAVNE FL 33149

*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:** PIETRI , OSCAR ALFREDO

**MGR**

**02/22/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date