

**2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L16000136222

**Entity Name:** OSSEL LLC**Current Principal Place of Business:**20028 BACK NINE DR  
BOCA RATON, FL 33498**Current Mailing Address:**20028 BACK NINE DR  
BOCA GREENS  
BOCA RATON, FL 33498 US**FEI Number:** 37-1832627**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SELENER, TAMARA D  
20028 BACK NINE DR  
BOCA RATON, FL 33498 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:** TAMARA SELENER

11/09/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER, MANAGER  
Name SELENER, EDUARDO J SR  
Address 20028 BACK NINE DR  
City-State-Zip: BOCA RATON FL 33498

Title MANAGER, AUTHORIZED MEMBER  
Name DAZCAL DE SELENER, ELSA R MRS  
Address 20028 BACK NINE DR  
City-State-Zip: BOCA RATON FL 33498

Title AUTHORIZED REPRESENTATIVE,  
MANAGER  
Name SELENER, TAMARA DINA  
Address 20028 BACK NINE DR  
BOCA GREENS  
City-State-Zip: BOCA RATON FL 33498

Title AUTHORIZED MEMBER  
Name SELENER, TAMARA DINA MRS  
Address 20028 BACK NINE DR  
City-State-Zip: BOCA RATON FL 33498

*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:** TAMARA SELENER**MEMBER**

11/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date