

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000209888

**Entity Name:** ORISAB, LLC

**Current Principal Place of Business:**

7767 NW 146 ST  
MIAMI LAKES, FL 33016

**Current Mailing Address:**

7767 NW 146 ST  
MIAMI LAKES, FL 33016 US

**FEI Number:** 82-3106660

**Certificate of Status Desired:** No

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

SABINA, MITCHEL  
7767 NW 146 ST  
MIAMI LAKES, FL 33016 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            AMBR  
Name            SABINA, MITCHEL  
Address        7767 NW 146 ST  
City-State-Zip: MIAMI LAKES FL 33016

*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:** MITCHEL SABINA

AMBR

04/25/2018

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

\_\_\_\_\_ Date