

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000056271

Entity Name: OPPYSA, LLC

Current Principal Place of Business:

1500 N. THACKER AVENUE
KISSIMMEE, FL 34741

Current Mailing Address:

1500 N. THACKER AVENUE
KISSIMMEE, FL 34741 US

FEI Number: 83-3918914

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VILA, PADRON & DIAZ, P.A.
201 ALHAMBRA CIRCLE
SUITE 702
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 MANAGER
Name CALDERON-BUENROSTRO, JUAN CARLOS
Address CALLE ECUADOR MANZANA 24
LOTE 6 CASA 3
City-State-Zip: CANCUN QUINTANA ROO

Title AP
Name CUEVAS CORTES, SEM JAVIER
Address 1500 N THACKER AVE.
City-State-Zip: KISSIMMEE FL 34741

Title MEMBER
Name VACATION SERVICES EAST, INC.
Address 1581 WEST 49TH STREET
SUITE 258
City-State-Zip: HIALEAH FL 33012

Title AP
Name AGUIRRE GARCIA, ENRIQUE
Address 1500 N THACKER AVE.
City-State-Zip: KISSIMMEE FL 34741

Title AP
Name CASILLAS RIVERA, ISMAEL
Address 1500 N THACKER AVE.
City-State-Zip: KISSIMMEE FL 34741

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: OSCAR VILA

RA

01/31/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date