

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000135384

Entity Name: OASIS LIFESTYLE COMMUNITIES LLC

Current Principal Place of Business:

1334 N.E. 151 STREET
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

8452 LONG ACRE DRIVE
MIRAMAR, FL 33025 US

FEI Number: 86-3673357

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OASIS OPTIMUM CARE LLC
8452 LONG ACRE DR
MIRAMAR, FL 33025 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 | CEO | Title | MANAGER |
| Name | WILLIAMS, MARJORIE | Name | WILLIS, JAMI EDWINA |
| Address | 8452 LONG ACRE DR | Address | 8452 LONG ACRE DRIVE |
| City-State-Zip: | MIRAMAR FL 33025 | City-State-Zip: | MIRAMAR FL 33025 |

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: MARJORIE WILLIAMS

CEO

02/18/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date