

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000036239

**Entity Name:** OASIS AT MARGATE ASSISTED LIVING LLC

**Current Principal Place of Business:**

1189 W RIVER DR  
MARGATE, FL 33063

**Current Mailing Address:**

1780 POLK ST  
11TH FLOOR  
HOLLYWOOD, FL 33020

**FEI Number:** 92-1828568

**Certificate of Status Desired:** No

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

KUNSTLINGER, ILANA  
1780 POLK ST  
11TH FLOOR  
HOLLYWOOD, FL 33020 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            OASIS AT MARGATE HOLDINGS LLC  
Address        1780 POLK ST, 11TH FLOOR  
City-State-Zip: HOLLYWOOD FL 33020

*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:** OASIS AT MARGATE HOLDINGS LLC

**MEMBER**

**04/15/2024**

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

\_\_\_\_\_  
Date