

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000000509

**Entity Name:** SLV OAKLEAF, L.L.C.

**Current Principal Place of Business:**

201 N. FRANKLIN STREET, SUITE 2200  
TAMPA, FL 33602

**Current Mailing Address:**

201 N. FRANKLIN STREET, SUITE 2200  
TAMPA, FL 33602 US

**FEI Number:** 27-1910948

**Certificate of Status Desired:** No

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

KUSSNER, STEPHEN  
201 NORTH FRANKLIN STREET, SUITE 2200  
C/O GRAY ROBINSON, P.A.  
TAMPA, FL 33602 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 MEMBER  
Name SLV-FLA 1, L.L.C.  
Address 201 N. FRANKLIN STREET, SUITE  
2200  
City-State-Zip: TAMPA FL 33602

*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:** SLV-FLA 1, L.L.C.

MEMBER

04/26/2020

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

\_\_\_\_\_  
Date