## 2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000006494

Entity Name: OASIS PARK SQUARE SINGLE FAMILY, LLC

**Current Principal Place of Business:** 

3470 NW 82ND AVE SUITE 988

DORAL. FL 33122

## **Current Mailing Address:**

3470 NW 82ND AVE SUITE 988 DORAL. FL 33122

FEI Number: 46-3729384 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SILVA, FRANK 3470 NW 82ND AVE SUITE 988 DORAL, FL 33122 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

**FILED** Apr 22, 2015

**Secretary of State** 

CC1961541277

Authorized Person(s) Detail:

Title MGR Title MGR

SHOMA SFH AT PAR SQUARE LLC Name RD OASIS SINGLE FAMILY LLC Name Address 3470 NW 82ND AVE SUITE 988 Address 315 S BISCAYNE BLVD 4TH FLOOR

City-State-Zip: MIAMI FL 33131 City-State-Zip: DORAL FL 33122

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: MASOUD SHOJAEE

Electronic Signature of Signing Authorized Person(s) Detail

04/22/2015 **MANAGER** 

Date