## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000129155

Entity Name: OKTAVIS LLC

**Current Principal Place of Business:** 

8870 N HIMES AVENUE SUITE 352 TAMPA, FL 33614

**Current Mailing Address:** 

8870 N HIMES AVENUE SUITE 352 TAMPA, FL 33614

FEI Number: 46-1159956 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBE, HANS-JOACHIM 8870 N HIMES AVENUE SUITE 352 TAMPA, FL 33614 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** Mar 30, 2016

**Secretary of State** 

CC5093200519

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

Name FRANKENSTEIN, JENS Name ROBE, HANS-JOACHIM 554 19TH STREET NW Address 8870 N HIMES AV #351 Address TAMPA FL 33614 City-State-Zip: RUSKIN FL 33570 City-State-Zip:

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: HANS-JOACHIM ROBE