

2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L19000089693

Entity Name: OHM SAI HOLI LLC**Current Principal Place of Business:**280 EGLIN PKWY NE
FORT WALTON BEACH, FL 32547**Current Mailing Address:**PO BOX 1269
FORT WALTON BEACH, FL 32549 US**FEI Number:** 83-4223567**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PATEL, HARSHIL
280 EGLIN PKWY NE
FORT WALTON BEACH, FL 32547 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	MBR
Name	PATEL, HARSHIL
Address	1548 VENICE AVE
City-State-Zip:	FORT WALTON BEACH FL 32549

Title	AMBR
Name	PATEL, JESAL
Address	242 TWIN LAKES LANE
City-State-Zip:	DESTIN FL 32541

Title	AMBR
Name	PATEL, DIPALI
Address	1378 HODGESVILLE RD
City-State-Zip:	DOTHAN AL 36301

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: HARSHIL PATEL

PRESIDENT

10/22/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date