

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000128721

**Entity Name:** OAKLAND PARK DIXIE LLC

**Current Principal Place of Business:**

1600 NE 1ST AVE.  
SUITE 3800  
MIAMI, FL 33132

**Current Mailing Address:**

1600 NE 1ST AVE.  
SUITE 3800  
MIAMI, FL 33132 US

**FEI Number:** 85-1137030

**Certificate of Status Desired:** No

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

BAILEY, NATALIE  
1600 NE 1ST AVE.  
SUITE 3800  
MIAMI, FL 33132 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           | MGR                            | Title           | AMBR                           |
| Name            | SUAREZ DE PUGA, DANIEL         | Name            | SHOSHANI, NIR                  |
| Address         | 1600 NE 1ST AVE.<br>SUITE 3800 | Address         | 1600 NE 1ST AVE.<br>SUITE 3800 |
| City-State-Zip: | MIAMI FL 33132                 | City-State-Zip: | MIAMI FL 33132                 |
| Title           | AMBR                           |                 |                                |
| Name            | GOTTESMANN, RON                |                 |                                |
| Address         | 1600 NE 1ST AVE.<br>SUITE 3800 |                 |                                |
| City-State-Zip: | MIAMI FL 33132                 |                 |                                |

*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:** DANIEL SUAREZ DE PUGA

**MANAGER**

**01/28/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date