

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000005056

Entity Name: OASIS IV THERAPY LLC

Current Principal Place of Business:

6207 S. WESTSHORE BLVD
APT. 6053
TAMPA, FL 33616

Current Mailing Address:

6207 S. WESTSHORE BLVD
APT. 6053
TAMPA, FL 33616 US

FEI Number: 92-1687836

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TAX STARZ USA, LLC.
6207 S. WESTSHORE BLVD
APT. 6053
TAMPA, FL 33616 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: LOUIS HENRY

02/19/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name PRCHLIK, ANGELA M
Address 6207 S. WESTSHORE BLVD, APT.
6053,
City-State-Zip: TAMPA FL 33616

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: ANGELA PRCHLIK

MGR

02/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date