

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000008127

**Entity Name:** OAK RIDGE DR, LLC

**Current Principal Place of Business:**

6750 N. ANDREWS AVE SUITE 200  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

6750 N. ANDREWS AVE SUITE 200  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** 45-4339462

**Certificate of Status Desired:** No

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

AGUILAR, FABIANO S  
9935 NE 13 AVE  
MIAMI SHORES, FL 33138 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            AMBR  
Name            SILVEIRA, FABIANO  
Address        9935 NE 13 AVE  
City-State-Zip: MIAMI SHORES FL 33138

Title            AMBR  
Name            DE LA MORA, LUIS  
Address        URB PASEO LOS ROBLES COND LA  
                    CIMA AP 402  
City-State-Zip: MAYAGUEZ, AL 00680

*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:** FABIANO SILVEIRA AGUILAR

**PRINCIPAL**

**01/11/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date