

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1600000461

**Entity Name:** BSLS OPA LOCKA LLC

**Current Principal Place of Business:**

4000 QUAYSIDE TERRACE  
APT. 1712  
MIAMI, FL 33138

**FILED**  
**Apr 30, 2017**  
**Secretary of State**  
**CC9059483195**

**Current Mailing Address:**

4000 QUAYSIDE TERRACE  
APT. 1712  
MIAMI, FL 33138 US

**FEI Number:** 47-1671621

**Certificate of Status Desired:** No

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

SILBERFARB, BERNARD  
4000 QUAYSIDE TERRACE  
APT. 1712  
MIAMI, 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 MGR  
Name SILBERFARB, PAUL  
Address 290 DEVON RD.  
City-State-Zip: TENAFly NJ 07670

*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:** PAUL SILBERFARB

**MGR**

**04/30/2017**

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

\_\_\_\_\_  
Date