

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000380967

Entity Name: MY TROPICAL OASIS LLC

Current Principal Place of Business:

10050 NW 135 ST
HIALEAH GARDENS, FL 33018

Current Mailing Address:

10050 NW 135 ST
HIALEAH GARDENS, FL 33018 US

FEI Number: 88-4068849

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALTERNATE TAX
4441 COCONUT CREEK BLVD
COCONUT CREEK, FL 33066 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 LINVILLE, KENNETH E
Address 10050 NW 135 ST
City-State-Zip: HIALEAH GARDENS FL 33066

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: KENNETH LINVILLE

MGR

04/29/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date