

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000086672

Entity Name: 1001 OLD TOMOKA LLC

**FILED**  
**Nov 15, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

1725 PALMER DRIVE  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

1001 OLD TOMOKA ROAD  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

8 CURVED CREEK WAY  
ORMOND BEACH, FL 32174

**New Mailing Address:**

FEI Number: 27-3265116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

OFER, SHARON  
8 CURVED CREEK WAY  
ORMOND BEACH, FL 32174 US

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

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: SHOSHANA SHARON

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SHARON, OFER  
Address: 8 CURVED CREEK WAY  
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR  
Name: SHARON, SHOSHANA  
Address: 8 CURVED CREEK WAY  
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: SHOSHANA SHARON

ADM

11/15/2013

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date