

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000051632

Entity Name: OLD FIRM OF TALLAHASSEE LLC

Current Principal Place of Business:

150 JOHN KNOX RD
TALLAHASSEE, FL 32303

Current Mailing Address:

P.O. BOX 12879
TALLAHASSEE, FL 32317

FEI Number: 27-2571905

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SULLIVAN, DAVID G
150 JOHN KNOX ROAD
TALLAHASSEE, FL 32303 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 PRESIDENT
Name SULLIVAN, DAVID G
Address 150 JOHN KNOX RD
City-State-Zip: TALLAHASSEE FL 32303

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: DAVID SULLIVAN

MANAGING PARTNER

01/21/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date