

**2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000147238

**Entity Name:** OMER TIME, LLC

**Current Principal Place of Business:**

4543 SPRINGFIELD BLVD.  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

4543 SPRINGFIELD BLVD.  
JACKSONVILLE, FL 32206

**FEI Number:** 26-3318886

**Certificate of Status Desired:** No

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

PORTER, OMER  
4543 SPRINGFIELD BLVD  
JACKSONVILLE, FL 32206 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:** OMERPORTER

04/28/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name PORTER, OMER  
Address 4543 SPRINGFIELD BLVD  
City-State-Zip: JACKSONVILLE FL 32206

*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:** OMER PORTER

MGR

04/28/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date