

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000046566

Entity Name: SECOND CHANCE LFP, LLC

Current Principal Place of Business:

5151 TROUT RIVER BOULEVARD
JACKSONVILLE, FL 32208

Current Mailing Address:

5151 TROUT RIVER BOULEVARD
JACKSONVILLE, FL 32208

FEI Number: 46-2479691

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCLAIN, MICHAEL S
5151 TROUT RIVER BOULEVARD
JACKSONVILLE, FL 32208 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 MCCLAIN, MICHAEL S
Address 5151 TROUT RIVER BOULEVARD
City-State-Zip: JACKSONVILLE FL 32208

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: MICHAEL S. MCCLAIN

OWNER

04/30/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date