

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L01000008534

Entity Name: EOP, LLC

**FILED**  
**Feb 26, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

2790 NW 43RD STREET, SUITE 200  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

2790 NW 43RD STREET, SUITE 200  
GAINESVILLE, FL 32606

**New Mailing Address:**

FEI Number: 26-7470924

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PERRY, PATRICK H  
2790 NW 43RD STREET, SUITE 200  
GAINESVILLE, FL 32606 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: PATRICK H PERRY

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: PERRY, PATRICK H  
Address: 2790 NW 43RD STREET, SUITE 200  
City-St-Zip: GAINESVILLE, FL 32606

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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: PATRICK H PERRY

MR.

02/26/2014

Electronic Signature of Authorized Person

Date