

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L03000010739

Entity Name: OCEANSIDE 932, L.L.C.

**FILED**  
**Nov 12, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

177 RIVER MARSH DRIVE  
PONTE VEDRA BEACH, FL 32082 US

**New Principal Place of Business:**

**Current Mailing Address:**

177 RIVER MARSH DRIVE  
PONTE VEDRA BEACH, FL 32082 US

**New Mailing Address:**

FEI Number: 33-1050296

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAMPTON, WADE  
10110 SAN JOSE BOULEVARD  
JACKSONVILLE, FL 32257 US

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

MARONEY, JOHN  
707 PENINSULAR PLACE  
JACKSONVILLE, FL 32204 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: JOHN MARONEY

11/12/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WILSON, GREGORY R  
Address: 149 BRISTOL PLACE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

Title: MGRM ( ) Delete  
Name: DODD, LANHAM B  
Address: 177 RIVER MARSH DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: GREGORY R. WILSON

MGRM

11/12/2008

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