

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000070344

Entity Name: OHSS OF FLORIDA, LLC

FILED  
Oct 13, 2006  
Secretary of State

## Current Principal Place of Business:

356 CROTON DR  
MAITLAND, FL 32751

## New Principal Place of Business:

6147 S RIDGEWOOD AVE  
LOT 12  
PORT ORANGE, FL 32127

## Current Mailing Address:

P.O. BOX 941538  
MAITLAND, FL 32794

## New Mailing Address:

P.O. BOX 291816  
PORT ORANGE, FL 32129-181

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

MITCHELL, DIANA  
356 CROTON DRIVE  
MAITLAND, FL 32751 US

## Name and Address of New Registered Agent:

ALLISON, ALAN  
6147 S RIDGE WOOD AVE  
LOT 12  
PORT ORANGE, FL 32127 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: ALAN A. ALIISON

10/13/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ALLISON, ALAN A  
Address: 6080 KOWETA DRIVE  
City-St-Zip: FAIRBURN, GA 30213

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition  
Name: ALLISON, ALAN A  
Address: 9115 CLARK RD  
City-St-Zip: FAIRBURN, GA 30213

Title: DIR ( ) Change (X) Addition  
Name: JONES, STEVE A  
Address: 6147 S RIDGE WOOD AVE  
City-St-Zip: PORT ORANGE, FL 32127

I hereby certify that the information supplied with this filing does not qualify for the 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: ALAN A. ALLISON

PRES

10/13/2006

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