

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000100487

Entity Name: OCA PROPERTIES, LLC

FILED  
Dec 08, 2006  
Secretary of State

## Current Principal Place of Business:

127 W. FAIRBANKS AVE  
#237  
WINTER PARK, FL 32789

## New Principal Place of Business:

## Current Mailing Address:

127 W. FAIRBANKS AVE  
#237  
WINTER PARK, FL 32789

## New Mailing Address:

FEI Number: 20-3608790      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

## Name and Address of New Registered Agent:

STONE, NELSON D  
127 W. FAIRBANKS AVENUE  
237  
WINTER PARK, FL 32789 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: NELSON D STONE

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: NESS, JOSEPH L  
Address: 12675 WATERHAVEN CIRCLE  
City-St-Zip: ORLANDO, FL 32828

Title: MGR (X) Delete  
Name: STONE, NELSON D  
Address: 4388 REAL COURT  
City-St-Zip: ORLANDO, FL 32808

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: STONE, NELSON D  
Address: 4388 REAL COURT  
City-St-Zip: ORLANDO, FL 32808

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

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: NELSON D STONE

MGR

12/08/2006

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