

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000042586

**FILED**  
**Oct 02, 2012**  
**Secretary of State**

**Entity Name:** ONE FIFTEENTH STREET, L.L.C.

**Current Principal Place of Business:**

2764 SHADE TREE DRIVE  
ORANGE PARK, FL 32003 US

**New Principal Place of Business:**

**Current Mailing Address:**

2764 SHADE TREE DRIVE  
ORANGE PARK, FL 32003 US

**New Mailing Address:**

**FEI Number:** 20-4746002

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FORD, BOWLUS, DUSS, MORGAN, KENNEY, SAFER  
10110 SAN JOSE BLVD.  
JACKSONVILLE, FL 32257 US

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

SCAIFE, WILLIAM O III  
2764 SHADE TREE DRIVE  
ORANGE PARK, FL 32003 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: WILLIAM O. SCAIFE

10/02/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SCAIFE, WILLIAM O III  
Address: 2764 SHADE TREE DRIVE  
City-St-Zip: ORANGE PARK, FL 32003 US

Title: MGRM  
Name: SCAIFE, STACEY  
Address: 2764 SHADE TREE DRIVE  
City-St-Zip: ORANGE PARK, FL 32003 US

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 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: STACEY SCAIFE

MGRM

10/02/2012

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