

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000049862

**FILED**  
**Dec 11, 2011**  
**Secretary of State**

**Entity Name:** OAK CREEK, LLC

**Current Principal Place of Business:**

4402 CHARRO LANE  
PLANT CITY, FL 33565 US

**New Principal Place of Business:**

**Current Mailing Address:**

4402 CHARRO LANE  
PLANT CITY, FL 33565 US

**New Mailing Address:**

**FEI Number:** 26-0254850

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LASMAN, JEFFREY M ESQ.  
1560 W. CLEVELAND STREET  
TAMPA, FL 33606 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: JEFFREY LASMAN, ESQ

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GATES, PAUL D  
Address: 4402 CHARRO LANE  
City-St-Zip: PLANT CITY, FL 33565

Title: MGRM  
Name: GATES, PATRICIA A  
Address: 4402 CHARRO LANE  
City-St-Zip: PLANT CITY, FL 33565

Title: MGRM  
Name: BOYETTE, MEGHAN E  
Address: 4929 PAINTED GAITS  
City-St-Zip: PLANT CITY, FL 33565

Title: MGRM  
Name: GATES, JENNA L  
Address: 4402 CHARRO LANE  
City-St-Zip: PLANT CITY, FL 33565

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: PAUL D. GATES

MR.

12/11/2011

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