

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State

05-01-2008 90036 023 ***138.75

DOCUMENT # L07000128144

1. Entity Name
O2 HOLDINGS, LLC



Principal Place of Business
**50 NORTH LAURA STREET
SUITE 3300
JACKSONVILLE, FL 32202 US**

Mailing Address
**50 NORTH LAURA STREET
SUITE 3300
JACKSONVILLE, FL 32202 US**

30007553



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04162008 Chg-LLC CR2E083 (12/06)

4. FEI Number

26-1686214

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**YORK, JEFFREY S
50 NORTH LAURA STREET
SUITE 3300
JACKSONVILLE, FL 32202**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
O'HARE, JAMES P
7 SAINT PAUL STREET, SUITE 1000
BALTIMORE, MD 21202**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

[Signature]

4/28/08

4106594418

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

ATTACHMENT
30007533

O2 HOLDINGS, LLC.
7 SAINT PAUL STREET
SUITE 1000
BALTIMORE, MD 21202-1671

1101

citi smith barney
4-28-08

55-7289/212

Pay to the
Order of

FLORIDA DEPARTMENT OF STATE
One hundred thirty-eight & 75/100

\$138.75

Dollars

☐ FINANCIAL MANAGEMENT ACCOUNT
CitiBank, N.A. Englewood Cliffs, N.J.

For # 107000128144

⑈001101⑈

⑈021272655⑈

1086776073⑈



MP