

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000014713

Entity Name: SUMMER OAK GROUP LLC

**FILED**  
**Nov 28, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

1111 KANE CONCOURSE  
SUITE 209  
BAY HARBOR ISLANDS, FL 33154 US

## **New Principal Place of Business:**

5350 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211 US

## **Current Mailing Address:**

1111 KANE CONCOURSE  
SUITE 209  
BAY HARBOR ISLANDS, FL 33154 US

## **New Mailing Address:**

5350 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211 US

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

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

FISHMAN, GREGORY ESQ.  
1111 KANE CONCOURSE  
SUITE 209  
BAY HARBOR ISLANDS, FL 33154 US

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

FISHMAN, GREGORY ESQ.  
2750 NE 185 ST., STE. 302  
AVENTURA, FL 33180 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: GREGORY R. FISHMAN

11/28/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LECLAIR MANAGEMENT INC.  
Address: 5350 ARLINGTON EXPRESSWAY  
City-St-Zip: JACKSONVILLE, FL 32211 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: ROBERT LECLAIR

MGR

11/28/2011

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