2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2015
Secretary of State
CC0796015992

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Entity Name: OHM TALLAHASSEE LLC

Current Principal Place of Business:

1695 CAPITAL CIRCLE NW
TALLAHASSEE, FL 32303

Current Mailing Address:

1695 CAPITAL CIRCLE NW
TALLAHASSEE, FL 32303

FEI Number: 55-0863862

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATEL, SATISH R
402 MEADOW RIDGE DRIVE
TALLAHASSEE, FL 32312 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	PATEL, SATISH R	Name	PATEL, JAGRUTI S
Address	402 MEADOW RIDGE DRIVE	Address	402 MEADOW RIDGE DRIVE
City-State-Zip:	TALLAHASSEE FL 32312	City-State-Zip:	TALLAHASSEE FL 32312
Title	MGRM	Title	MGRM
Name	PATEL, HASMUKH L	Name	PATEL, SUMATI H
Address	4339 CREEKVIEW DR	Address	4339 CREEKVIEW DR
City-State-Zip:	DUBLIN CA 94568	City-State-Zip:	DUBLIN CA 94568

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SATISH PATEL MANAGER 02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date