2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000015791

Entity Name: TWIN PALM OF MARION COUNTY, LLC

Current Principal Place of Business:

2640 SW 32ND PLACE OCALA, FL 34471

Current Mailing Address:

2640 SW 32ND PLACE OCALA, FL 34471

FEI Number: 26-4285806

Name and Address of Current Registered Agent:

EPISCOPO, ANN 2640 SW 32ND PLACE OCALA, FL 34471 US

A, FL 34471 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

Authorized Person(s) Detail :

| Title | MGRM | Title | MGRM |
|-----------------|-------------------------------|-----------------|-------------------------------|
| Name | GUPTA, NIRAV | Name | FARR, DEREK |
| Address | 321 S.E. 29TH PLACE, STE. 101 | Address | 321 S.E. 29TH PLACE, STE. 101 |
| City-State-Zip: | OCALA FL 34471 | City-State-Zip: | OCALA FL 34471 |

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: DEREK FARR O

OWNER

03/08/2016 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 08, 2016 Secretary of State CC6784905140

Date

Certificate of Status Desired: No