

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000161402

**Entity Name:** 3107 POST STREET LLC

**Current Principal Place of Business:**

11686 JACOB LOIS COURT  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

P.O. BOX 43400  
JACKSONVILLE, FL 32203 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

RLM CAPITAL PSP  
11686 JACOB LOIS COURT  
JACKSONVILLE, FL 32218 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:** ROBERT L MITCHELL, TRUSTEE

04/21/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name RLM CAPITAL PSP  
Address 11686 JACOB LOIS COURT  
City-State-Zip: JACKSONVILLE FL 32218

Title MGR  
Name HALL, KEVIN L  
Address 1612 SHEARWATER DRIVE  
City-State-Zip: JACKSONVILLE FL 32218

*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:** ROBERT L MITCHELL, TRUSTEE

MGR

04/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date