

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000091535

Entity Name: OUR FLORIDA HOME PSL, LLC

Current Principal Place of Business:

103 WILDWOOD DRIVE
ELKVIEW, WV 25071

Current Mailing Address:

103 WILDWOOD DRIVE
ELKVIEW, WV 25071

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CABLISH, BRIAN W
430 SUNRISE DRIVE
FORT PIERCE, FL 34945 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
Name MORRIS, KAREN P
Address 103 WILDWOOD DRIVE
City-State-Zip: ELKVIEW WV 25071

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: KAREN P. MORRIS

MANGER

04/29/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date