

2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L14000159691

Entity Name: OPEN DOOR ASSISTED LIVING LLC

Current Principal Place of Business:

3510 EAST FRIERSON AVE
TAMPA, FL 33603

Current Mailing Address:

P O BOX 6674
SEFFNER, FL 33583

FEI Number: 47-2060649

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PERRY, ANTHONY
10925 CLAY PIT RD
TAMPA, FL 33610 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: ANTHONY PERRY

07/19/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name PERRY, ALANA E
Address 10925 CLAY PIT RD
City-State-Zip: TAMPA FL 33610

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: ALANA PERRY

MGR

07/19/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date