

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000055822

**Entity Name:** OURTIME, LLC

**Current Principal Place of Business:**

209 GREEN LAKE DRIVE  
MYRTLE BEACH, SC 29572

**Current Mailing Address:**

P.O. BOX 1551  
NORTH MYRTLE BEACH, SC 29598

**FEI Number:** 47-3573897

**Certificate of Status Desired:** No

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

HAFT, STUART J ESQ  
340 ROYAL POINCIANA WAY, SUITE 321  
PALM BEACH, FL 33480 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 FISHMAN, FRED  
Address P.O. BOX 1551  
City-State-Zip: NORTH MYRTLE BEACH SC 29598

Title MGR  
Name FISHMAN, GAIL  
Address PO BOX 1551  
City-State-Zip: NORTH MYRTLE BEACH SC 29598

*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:** GAIL FISHMAN

**MANAGER**

**01/11/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date