

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000121391

**Entity Name:** OM15, LLC

**Current Principal Place of Business:**

1833 D'YOUVILLE LANE  
ATLANTA, GA 30341

**Current Mailing Address:**

1833 D'YOUVILLE LANE  
ATLANTA, GA 30341

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PARACORP INCORPORATED  
155 OFFICE PLAZA DRIVE  
1ST FLOOR  
TALLAHASSEE, FL 32301 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	Title	MGR
Name	CULLEN, KATHLEEN E	Name	CULLEN, GILBERT M II
Address	1833 D'YOUVILLE LANE	Address	1833 D'YOUVILLE LANE
City-State-Zip:	ATLANTA GA 30341	City-State-Zip:	ATLANTA GA 30341

*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:** CULLEN , KATHLEEN E

**MGR**

**02/29/2016**

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

\_\_\_\_\_  
Date