

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118064

**FILED**  
**Apr 30, 2008**  
**Secretary of State**

**Entity Name:** LAR ARTEMIS 1 LLC

**Current Principal Place of Business:**

1228 EUCLID AVE.  
SUITE 310 HALLE BUILDING  
CLEVELAND, OH 44115

**New Principal Place of Business:**

1001 LAKESIDE AVENUE  
SUITE 900  
CLEVELAND, OH 44114

**Current Mailing Address:**

1228 EUCLID AVE.  
SUITE 310 HALLE BUILDING  
CLEVELAND, OH 44115

**New Mailing Address:**

1001 LAKESIDE AVENUE  
SUITE 900  
CLEVELAND, OH 44114

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: THE LEIGHTON A. ROSE, NTHAL TRUST UN D ER DEED  
Address: 1228 EUCLID AVE.  
City-St-Zip: CLEVELAND, OH 44115

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ARTEMIS HOLDINGS, LL, C  
Address: 1001 LAKESIDE AVENUE, SUITE 900  
City-St-Zip: CLEVELAND, OH 44114

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: DAVID P. SCHLABIG

VP

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date