

M00000001216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

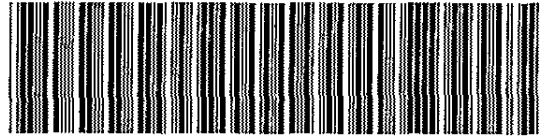
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CERTIFICATE OF STATUS
TALLAHASSEE, FLORIDA

RECEIVED

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REGISTRATION DIVISION
TALLAHASSEE, FLORIDA

M00-1216
GR

CT CORPORATION

CORPORATION(S) NAME

South Oaks Station LLC

M-1216

- | | | |
|--|---|--|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input checked="" type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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Name _____
 Availability _____
 Document _____
 Examiner _____
 Updater _____
 Verifier _____
 W.P. Verifier _____

5/5/03

AAM

Order#: 5844623 SO

Ref#: _____

Amount: \$ _____

660 East Jefferson Street
 Tallahassee, FL 32301
 Tel. 850 222 1092
 Fax 850 222 7615

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of Section 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent or both in the State of Florida.

- 1. The name of the limited liability company is: South Oaks Station LLC
- 2. The mailing address of the limited liability company is: 11690 Grooms Road, Cincinnati, Ohio 45242
- 3. 06/20/2000 Date of filing/registration in Florida
- 4. M00000001216 Document Number
- 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Corporation Service Company
 Name
1201 Hayes Street
 Address
Tallahassee FL 32301
 City, State and Zip

- 6. The name and address of the new registered agent and/or office:

C T Corporation System
 Name
1200 South Pine Island Road
 Address
Plantation FL 33324
 City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

By: R. Mark Addy
 R. Mark Addy, Authorized Representative of the Members

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

C T Corporation System
 By: Susan J. Metzger
 (Signature of Registered Agent)
Susan J. Metzger
 Assistant Secretary

Division of Corporations, P. O. Box 6327, Tallahassee, FL 32314

INHS18(10/99) FILING FEE: \$25.00
FL015-9/27/99 C T System Online

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 TALLAHASSEE, FLORIDA
 STATE DEPARTMENT OF REVENUE