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COVER LETTER

Division of Corporations				
SUBJECT: T.K. Harris Commercial Investry Name of Corporation				
Nume of Corporation	511			
DOCUMENT NUMBER: F9700000	3625			
The enclosed Statement of Change of Registered Office/Agent	and fee are submitted for filing.			
Please return all correspondence concerning this matter to the fo	ollowing:			
Gregory Thoma Name of Contact Per	os			
Name of Contact Per	son			
T.K. Harris Commercial Real Estate				
Firm/Company				
3930 Fulton Drive N.W.,	Suite 206			
Address				
Canton, OH 44718-	3040			
City/State and Zip Code				
tkharris@nci2000.net				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Gregory Thomas at (330 \ 492-8600			
Name of Contact Person A	330 492-8600 rea Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of				
Mailing Address: Amendment Section	Street Address: Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
•	Tallahassee, FL 32301			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•		tions 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this I for a corporation organized under the laws of the State of	
		egistered office or registered agent, or both, in the State of Florida.	
1. The name of the c	• –	T.K. Harris Commercial Investment Company 3930 Fulton Drive, N.W., #206	
2. The principal offi	ce address:	Canton, OH 44718	
3. The mailing addre	ess (if differe	ent):	
4. Date of incorpora	tion/qualifica	ation: 07/10/1997 Document number: F97000003625	
		of the current registered agent and registered office on file with the If resigned, enter resigned)	
		n & Moore, P.A.	
	2171 Pi	lne Ridge Rd., Šuite D	
 .	Naples,	, FL 34109	
6. The name and stree (if changed):	Parrish	f the new registered agent (if changed) and /or registered office R. h, Lawhon & Yarnell, P.A. ine Ridge Road, Ste. 101	FILED
		P.O. Box NOT acceptable	
	Naples	s, FL 34109	
The street address of as changed will be it	f its registere dentical.	red office and the street address of the business office of its registered agent,	
Such change was at authorized by the be	thorized by toard, or the c	resolution duly adopted by its board of directors or by an officer so corporation has been notified in writing of the change.	
-	at Registered Ag	t as registered agent and agree to act in this capacity, he provisions of all statutes relative to the proper and complete performance with and accept the obligation of my position as registered agent. Or, if this to reflect a change in the registered office address, I hereby confirm that the writing of this change. 2/25/11 Agent	
Kirt Poo	Huma		
Tuned	or Printed Name		

* * * FILING FEE: \$35.00 * * *