

F99000002768

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

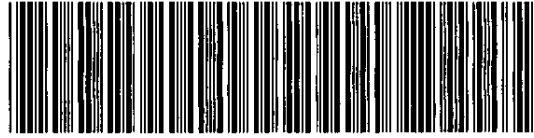
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500166947265

02/01/10--01043--023 \*\*35.00

APPROVED  
AND  
FILED  
10 FEB - 1 PM 5:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APR  
2/3/10  
TK



200 West Adams Street, Suite 2007  
Chicago, IL 60606  
(312) 346-3606 (800) 934-2556  
Fax: (312) 346-3607

January 27, 2010

***VIA REGULAR MAIL***

Division Of Corporations  
Florida Department Of State  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: THP Limited Inc.**

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the forms to change the registered agent/office for the above captioned in your state. Also, enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Norine Nagel", written in a cursive style.

Norine Nagel

NN/smc.  
Encl.

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of OH in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: THP Limited Inc.
2. The principal office address: 100 East Eight Street  
Cincinnati, OH 45202
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 05/28/1999 Document number: F99000002768
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System

1200 South Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.


2731 Executive Park Drive, Suite 4

(P.O. Box NOT acceptable)

Weston, FL 33331


The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

 1/20/10  
(Signature of an officer or director)

Randy R. Wilson, Secretary / Treasurer  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
(Signature of Registered Agent)

1/26/10  
(Date)

If signing on behalf of an entity:

Norine Nagel-Assistant Secretary

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

APPROVED  
AND  
FILED  
10 FEB - 1 PM 5:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA