

ACCOUNT NO. : 07210000032	
REFERENCE : 624423 7217	<u> </u>
AUTHORIZATION : Totaicia	neut
COST LIMIT : \$ 35.00 \$ 25.10	00
ORDER DATE : June 14, 2002	
ORDER TIME : 2:31 PM (0) 1000	501256 ()
ORDER NO. : 624423-015 \	No.
CUSTOMER NO: 7217983	O ESS R R
CUSTOMER: Ms. Julie A. Shover Brennan, Manna & Diamond, Llc The Carnegie Building 75 E. Market Street Akron, OH 44308	DECEIVED MANAGERE FIOR AHASSEE FIOR
CHANGE OF AGENT	5 Z G
NAME: C&S PROPERTIES OFLANDO, LLC	
	0057678920
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	T
CERTIFIED COPY XX PLAIN STAMPED COPY	FILED 02 JUN 14 PM 2: 44 SECRITARY OF STATE TALLAHASSEE FLORID
CONTACT PERSON: Troy Todd EXT# 1140	EFLOR
EXAMINER:	D 2: 44 STATE LORIDA

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

Pursuant to the provisions of sections 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 limit	ed liability company is: C&S Prop	perties Orlando, LI	ıc
2. The mailing address of	of the limited liability company is:	5715 Darrow Road,	Hudson, OH 44236
August 30, 2001	4.	L01000015050	
3. Date of filing/registra	tion in Florida	4. Document numbe	r
5. The name of the regist Florida Department of	ered agent and the registered office State:	address as shown on t	he records of the
	Todd Clarke		
	Name		.,
	60 Seagate Drive,	#505 	
	Address		
	Naples, FL 341		است.
	City, State and Z	•	AL 82
6. The name and address	of the new registered agent and/or	office:	FILED 2 JUN 14 PM 2: 44 ECRETARY OF STATE LLAHASSEE FLORIDA
	Corporation Service	Company	SSS I
	Name		
	1201 Hays Stree	4	
	Florida street address (P.O. Box	NOT acceptable)) 2: 44 STATE ORID
	Tallahassee FL	32301	
	City, State and Zip)	
and the business office of liability company, it is he	npany is not organized under the lar hange or changes are made, the Flor the registered agent will be identiced the registered agent will be identiced that the change(s) will be identicated liability company or as otherwise of the limited liability company.	orida street address of the cal. Or, in the case of a was/were authorized by	ne registered office Florida limited an affirmative vote of
Greg Lustik			
(Printed or typed name of signee)			
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm (Signature of Registered Agent)	intment as registered agent and aging of all statutes relative to the property of accept the obligations of my positive dogument is being filed to mere that the limited liability company of Brian Courtney Asst. V. Pres.	ree to act in this capact per and complete perfor tion as registered agen ly reflect a change in t has been notified in wr	ity. I further agree to mance of my duties, it as provided for in he registered office iting of this change.
Y	on of Corporations, P.O. Box 632	7. Tallahassee. FL 32	314
INH\$/8(10/99)	FILING FEE: \$2	ŕ	