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L. SELLERS
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EXAMINER



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SECRETARY OF STATE
SAFLAHASSEE FLORIDA

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ						
	Name of I	imited	l Liabi	lity Comp	any	
Dear S	ir or Madam:					
The en	iclosed Registered Agent/Registered C)ffice (Change	and fee(s	s) are submitted for filing.	•
Please	return all correspondence concerning	this m	atter to	the follo	wing:	
	JUDITH R. SOCKMAN			*****	•	
	Name of Person					
M	IANATEE WEST SHOPPING CEN	TER L	.LC			
	Firm/Company					
	3256 W. 25TH STREET Address			_		
	CLEVELAND OH 44109					
	City/State and Zip Code					
	JRSOCKMAN@HOTMAIL.CO mail address: (to be used for future annual report n	OM otificatio	m)			
	•		,			
For fu	rther information concerning this matter	er, plea	ase call	l:		
	JUDITH R. SOCKMAN	_ at (440		478-3494	
	Name of Person			Area Code a	& Daytime Telephone Number	
	STREET/COURIER ADDRESS:		MA	AILING A	DDRESS:	
	Registration Section			gistration S		
	Division of Corporations				orporations	
	Clifton Building 2661 Executive Center Circle). Box 632		
	Tallahassee, Florida 32301		1 81	nanassee, r	Florida 32314	
	Enclosed is a check for the following	ig amo	unt:			
ļ	\$25 Filing Fee		☐ \$:	55 Filing l	Fee & Certified Copy	

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.

• • • • - •	WEST SHOPPING CENTER LLC
2. (a) Principal office address of limited liability company	7405 MANATEE AVE. WEST
(Note: MUST BE STREET ADDRESS)	BRADENTON FL 34209
(b) Mailing address of limited liability company:	7907 BROADVIEW RD.
(Note: MAY BE POST OFFICE BOX)	BROADVIEW HEIGHTS OH 44147
2. D. A. CCII. Annie in Florida	L05000020474
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	LPS CORPORATE SERVICES, INC.
Registered Office Address:	46 N. WASHINGTON BLVD., #1 SARASOTA FL 34236
(b) Enter name of NEW Registered Agent and/or NEV	W Registered Office address:
NEW Registered Agent:	FRANKLIN ST. MANAGEMENT SERVICE
NEW Registered Office Address:	CARA DAM OFNITED DOME
(MUST BE FLORIDA STREET ADDRESS)	SUITE 100 TAMPA ,FL 33609
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member JUDITH R. SOCKMAN Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my possible to the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my possible to the provisions, I hereby confirm that the limited liability company	SUITE 100 TAMPA JAMPA JAMPA

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00