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SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 07 2015 T. CARTER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	SBL LAND HOLDINGS, LLC	3
		ne of Limited Liability Company
Dear S	ir or Madam:	
The en	closed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please	return all correspondence concerning th	is matter to the following:
Burkh	nart R Lindahl	
	Name of Person	
SBL I	AND HOLDINGS, LLC	
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Firm/Company	
c/o 3	13 Vista Circle	
	Address	
North	Olmsted, Ohio 44070	
	City/State and Zip Code	
burkli	ndahl@gmail.com	
E	E-mail address: (to be used for future and	nual report notification)
For fu	rther information concerning this matter	, please call:
Burkh	nart R Lindahl	216 269-0097
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
	Enclosed is a check for the following	g amount:
	■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy
INHS1	8 (2/14)	

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

(a)	313 Vista Circle	(b)	(b) 313 Vista Circle			
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of li	-	
	North Olmsted, Ohio 44070	.	North O	Imsted, Ohio 4		
	05/02/2005	— . l		43368		
	Date of filing/registration in Florida	4.		Document numb	er	
(a)	AGENTS AND CORPORATIONS, INC.					
(u)	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of Sta	te:		
	300 FIFTH AVENUE SOUTH					
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)		_		
	SUITE 101-330			_		ΞZ
	NAPLES	L34102			4 DE	ECH
(b)	REGISTERED AGENTS INC			_	£C 29	ETAR)
(-)	Enter name of NEW Registered Agent and/or NEW Register	ed Office add	ress:	_	P	
	REGISTERED AGENTS INC				-	STAT CORI
	NEW Registered Office Address:			_	8	D E
	3030 N. Rocky Point Drive, STE 150A			_		
	Tampa , I	_{FL_} 33607		_		
e cha ent v is/we	imited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the regis liability co s of the limi ne limited li	tered office mpany, it ted liabili	ce and the busines is hereby confirm ty company or as mpany.	s office of the	he registe :hange(s)
igna	ture of a member or authorized representative of a member			Printed or typed na	ame of signee	
oviși e obl meri	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provid ely reflect a change in the registered office address, d in writing of this change.	gree to act le performa ded for in C I hereby co	in this cap ince of my hapter 60 nfirm that	pacity. I further a duties, and I am S, F.S. Or, if this t the limited liabil	igree to com Jamiliar wit document i lity company	ply with h and ac s being j has bee

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

Bill Havre - President

Signature of Registered Agent