

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000105042

FILED
Oct 09, 2006
Secretary of State

Entity Name: BUCKEYE PROPERTIES, LLC

Current Principal Place of Business:

492 ALVINA LN.
CINCINNATI, OH 45255

New Principal Place of Business:

Current Mailing Address:

492 ALVINA LN.
CINCINNATI, OH 45255

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LAURA R DUNLAP

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EBNER, T. DAVID
Address: 492 ALVINA LN
City-St-Zip: CINCINNATI, OH 45255 US

Title: MGRM () Delete
Name: MILLER, JEFFREY A
Address: 2177 CARRINGTON ST. N.W.
City-St-Zip: NORTH CANTON, OH 44720 US

Title: MGRM () Delete
Name: BUCKHAM, BRIAN H
Address: 4415 SWAN LAKE DR.
City-St-Zip: COPLEY, OH 44321 US

Title: MGRM () Delete
Name: FULTON, R. SCOTT
Address: 5415 PORTCHESTER DR.
City-St-Zip: HUDSON, OH 44236 US

Title: MGRM () Delete
Name: YOUNG, RUSSELL F
Address: 851 OHIO PIKE
City-St-Zip: CINCINNATI, OH 45245 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: T. DAVID EBNER

MGRM

10/09/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date