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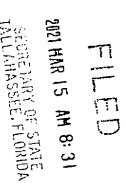
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COVER LETTER

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INHS18 (2/14)

TO:	Registration Section Division of Corporations	
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SUBJI	CCT: Oak Bay Properties F, LLC	
	Name of Lir	nited Liability Company
Dear S	ir or Madam:	
The en	closed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter	to the following:
	Joseph C. Bishara, Esq.	
	Name of Person	
F	oth, Blair, Roberts, Strasfeld & Lo	dge
	Firm/Company	
1	00 East Federal St., Suite 600	
	Address	
7	Youngstown, Ohio 44503	
	City/State and Zip Code	
<u></u>	bishara@roth-blair.com	
E	-mail address: (to be used for future annual repo	t notification)
For fur	ther information concerning this matter, please of	all:
	Joseph C. Bishara at (330) 744-5211
	Name of Person	Area Code & Daytime Telephone Number
	Mailing Address:	Street Address:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount	:
	△ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

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)	7950 Spartan Drive	_ (b)	<i></i>	Spartan Drive
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Boardman, Ohio 44512		Board	lman, Ohio 44512
	4/25/2013		L130000	Document number
	Date of filing/registration in Florida	4.		Document named
(a)	C T Corporation System			_
	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State	
	1200 South Pine Island Road			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS		2021 HAR I
	Plantation, FL	33324		AR 15 AM 8: 31 ETARY OF STATE HASSEE, FLORIDA
71.3	Joseph E. Thomas			8: 3
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	dress:	- <u>Ş</u>
	6308 Midnight Pass Road Villa	5_		_
	NEW Registered Office Address:			
	Sarasota FL	3434	2	_
hange gent v as/w ne art	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registere ability co of the lim limited l	ed office and impany, it is lited liability iability con	nd the business office of the registere is hereby confirmed that the change(s ty company or as otherwise provided
116	MA HOM & J stupe of a member or authorized representative of a member		COSEDII E	Printed or typed name of signee
Signa	I am a standard and around and around a around around a around around around a around around a around a around around a around around a around a around a around around a around	ee to act	in this cap	pacity. I further agree to comply with duties, and I am familiar with and 5, F.S. Or, if this document is being the limited liability company has be