

L15000 087 452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

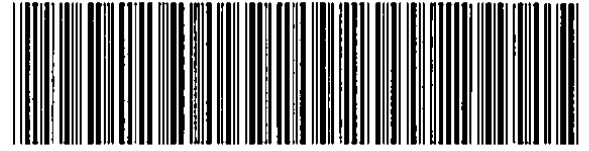
(Business Entity Name)

(Document Number)

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AUG 16 2019

S. YOUNG

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

19 AUG 12 AM 7:07

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1585 LANDS END ROAD LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JON HANSON
Name of Person

Firm/Company

10925 GIRDLED ROAD
Address

CONCORD TWP, OHIO 44077
City/State and Zip Code

LSICHKO@YFCOMPANIES.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LINDA SICHKO at (440) 477-3063
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 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.

1. Name of the limited liability company: 1585 LANDS END ROAD LLC

2. (a) 8952 TYLER BLVD
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

MENTOR, OH 44060

(b) 18952 TYLER BLVD
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

MENTOR, OH 44060

05/18/2015

L15000087452

3. Date of filing/registration in Florida 4. Document number

5. (a) COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COH

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

712 U.S. HIGHWAY ONE

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

SUITE 400

NORTH PALM BEACH, FL 33408

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19 AUG 12 AM 7:07
TALLAHASSEE, FLORIDA

(b) JON HANSON

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1595 LANDS END ROAD

NEW Registered Office Address:

MANALAPAN, FL 33462

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

JON HANSON
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent