## L17000230663

(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300349709693

BBA. No. Holder Har March

STOKE LARY OF STATE

U. Smith

## COVER LETTER

UBJECT: Pinchers of Venice Investors LL	C		
	Name of Limited I	Liability Company	
Dear Sir or Madam:			
he enclosed Registered Agent/Registered	Office Change and	d fec(s) are submitted for filing.	
lease return all correspondence concerning	g this matter to the	e following:	
Kelly Berry			
Name of Person		<del></del>	
lahn Loeser & Parks LLP			
Firm/Company			
200 Public Square, Suite 2800			20
Address			20 AUG
Tleveland, Ohio 44114			ŧ
City/State and Zip Coo	de	<u> </u>	H. 1 . 1 . 1
sberry@hahnlaw.com			-
E-mail address: (to be used for future	annual report noti	fication)	
or further information concerning this ma	tter, please call:		
Kelly Berry	216 at (	274-2368	
Name of Person		Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

□ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

## 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.

	Name of the limited liability company:		\$ 1.00.	
	Palacia L. O.			
	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)	(0,	Mailing address of limited lial (Note: MAY BE POST OF	oility company:
	10303 Brecksville Road		10303 Brecksville Road	
	Brecksville, OH 44141		Brecksville, OH 44141	
	11/07/2017		17000230663	
3.	Date of filing/registration in Florida	4.	Document number	···
5. (a)	D. Michael Sherman			
	Registered Agent and Registered Office shown on the records of 15730 Pipers Glen	f the Florida D	tept, of State;	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		·. <u></u>
				vi€: 20
	Ft. Myers, FL	. 33912	<u></u>	
(b)	HI. Statutory Agent, Inc.  Enter name of NEW Registered Agent and for NEW Basis and the New Basis and			AUG 14 AMII: 12
• •	Enter name of NEW Registered Agent and/or NEW Registered	Office addre	55:	AH II:
	5811 Pelican Bay Blvd., Suite 650			= 1
	NEW Registered Office Address:	<del></del>		<i>∾</i>
		·		
	Naples	34108		
If the linchange cagent wi was/were the articl	nited liability company is not organized under the law or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited lial e authorized by an affirmative vote of the members of less of organization on the operating agreement of the liability.	egistered o bility compa the limited imited liabi	te of Florida, it is hereby confirmed ffice and the business office of the any, it is hereby confirmed that the	registered
	re of a member or authorized representative of a member	•	Printed or typed name of signee	
ne anage a merelu	eaccept the appointment as registered agent and agree us of all statutes relative to the proper and complete partitions of my position as registered agent as provided partitions of the change in the registered office address. The naviting of this change is the registered office address.	e to act in a erformance for in Chap ereby confir	his capacity. I further agree to con of my duties, and I am familiar wi ter 605, F.S. Or, if this document i on that the limited liability company	nply with the th and accept is being filed thas been
	of Registered Agent			