	1 ONII OIIII DOC	TITE OF THE T		100	<u>nj</u>	
DOCU	MENT # MOOO	00002163				
MOBERGER I, LTD. CO., L.L.C.				FILED		
		·			2001 APR 23 PM 3: 06	
Principal Place of Business Mailing Address						
3045 EAST FIFTH AVE. 3045 EAST FIFTH AVE. COLUMBUS OH 43219 COLUMBUS OH 43219					DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA	
0010000						
2. Principal Place of Business 3. Mailing Address						
2. Fillicipal Flace of Dusiness 3. Walling Address						
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE		
City & State City & State				4. FEI Number Applied For Not Applicable		
Zip	Country	Zip	Coun	try	5. Certificate of Status Desired S5.00 Additional Fee Required	
	6. Name and Address of Current	t Registered Agent	-1 =		7. Name and Address of New Registered Agent	
				Name		
CORPORATION SERVICE COMPANY 1201 HAYS STREET				Street Address (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32301-2525					• 4.	
				City	FL Zip Code	
8. The above	named entity submits this statement for	or the purpose of changing i	ts registere	ed office or	r registered agent, or both, in the State of Florida.	
SIGNATURE	Signature, typed or printed name of registered agent	the desirable (A)	TÉ. Danistan	.	ture required when reinstating) DATE	
	Signature, typed or printed name of registered agent	A January of the Land American Dates and	Comp. A Company and	to the state of the common	ture required when reinstaturity	
		¥€###FILE!	10W!!!	FEE IS \$	\$50.00	
		Make Check F	ayable t	o Depart	ment of State	
9.	MANAGING MEMB	BERS/MEMBERS	10.	C	ADDITIONS/CHANGES	
TITLE		☐ Delete	TITLE		MEMBEQ Change Addition	
NAME			NAMI		JOCK M. MOBERGER 10076 SYLVIAN DRIVE	
STREET ADDRESS CITY-ST-ZIP				et address - St- Zip	DRUM OH 43017	
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Delete	TITLE		MEMBER Change DAddition	
NAME:			NAMI		TY A MOBERGER	
STREET ADDRESS	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			ET ADDRESS	10036 SYLVIAN DENE	
CITY_ST-ZIP				-ST-ZIP	TOBLIN OH 43017 -MEMBER Change MAddition	
TITLE NAME		L. Delete	NAME		CHADO MABERGER	
STREET ADDRESS				ET ADDRESS	10036 SYLVIAN DRIVE	
CITY-ST-ZIP			CITY-	ST-ZIP	DUBLIN OH 43017	
TITLE		. Delete	TITLE		MANAGING MEMBER Change Change Change	
name Street address		•	NAME STREE	T ADDRESS	ROBERT C. MOBERGER.	
CITY-ST-ZIP	* * * * * * * * * * * * * * * * * * * *			ST-ZIP	PUBLIN OH 43017	
TITLE	,	☐ Delete	TITLE		201014101 2 that DAdathn	
NAME			NAME	:	20000410120m2-07dathn -05/01/0101040003	
STREET ADDRESS				T ADDRESS	*****50.00 *****50.00	
CITY-STEZIP FITLE				ST-ZIP	CT Observe CT addition	
NAME (•	☐ Delete	TITLE	ľ	Change Addition	
STREET ADDRESS				T ADDRESS	·	
CITY-ST-ZIP			CITY-	ST-ZIP		
11. I hereby c	ertify that the information supplied with	this filing does not qualify to	or the exer	nption state	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
indicated	on this report is true and accurate and pility company or the receiver or trustee	that my signature shall have	the same	legal effec	of as it made under oath: that I am a managing member or manager of the	
	11/2/	10				
SIGNAT	URE! / lolur /	10/man			4.15.01 614-235.0057	
J. J . 177.]	SIGNATURE AND TYPED OR PRINTED NAME OF	F SIGNING MANAGING MEMBER, MA	NAGER, OR	AUTHORIZED		