2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Mar 24, 2002 8:00 am DOCUMENT # M010Q0000181 **Secretary of State** 1. Entity Name 03-24-2002 90036 047 ****50.00 HIBC 701 LLC Mailing Address Principal Place of Business 250 EAST BROAD ST., STE. 1900 250 EAST BROAD ST., STE, 1900 COLUMBUS OH 43215 COLUMBUS OH 43215 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 31-1677602 Not Applicable \$5.00 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SIMBACK, KENNETH Speet Address (P.O. Box Number is Not Acceptable), 300 International C/O THE PIZZUTI COMPANIES 255 S. ORANGE AVE., STE. 1350 ORLANDO FL 32801 ternent for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named SIGNATURE agent and title if applicable. (NOTE: Registered Agent signatu FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. Addition Change TITLE TITLE Delete NAME NAME 250 E STREET ADDRESS STREET ADDRESS 43215 CITY-ST-ZIP Columbus CITY-ST-ZIP Change Delete TITLE TITLE U Paley NAME NAME STREET ADDRESS STREET ADDRESS Oh 43215 CITY-ST-ZIP Culumbus CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE P Wamer NAME NAME SK 1900 Broad STREET ADDRESS STREET ADDRESS 256 E CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF TITLE Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature and 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 expressed to execute this report as required by Chapter 608, Florida Statutes.

FILED