

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 05, 2002 8:00 am**  
**Secretary of State**

05-05-2002 90214 001 \*\*\*200.00

**DOCUMENT #** M010Q0Q02741

**1. Entity Name**

BEACHBOY LLC

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

45 W. Prospect Avenue

**3. Mailing Address**

Suite, Apt. #, etc.

#1500 Guildhall Building

Suite, Apt. #, etc.

City & State

Cleveland, Ohio

City & State

Zip

44115

Country

USA

Zip

Country

**4. FEI Number**

52-2290930

**Applied For**

Not Applicable

**5. Certificate of Status Desired** ☐

**\$5.00** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name

CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)

1200 South Pine Island Road

City

Plantation

FL

Zip Code  
33324

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable.

**DATE**

**FEE IS \$50.00**

**Make Check Payable to Department of State  
DUE BY MAY 1**

**9. MANAGING MEMBERS/MANAGERS**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**  
Member  
BellBoy, Inc.  
45 W. Prospect Ave., #1500 Guildhall  
Cleveland, Ohio 44115

**TITLE**  
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**CITY-ST-ZIP**

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IN THIS SPACE**

CR2E083B (12/01)

**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 shall 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 empowered to execute this report as required by Chapter 608, Florida Statutes.**

**SIGNATURE:**

Richard C. Conti, V.P. of Member 04/05/02

216-

4380

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #