## M04000001955

(Requestor's Name)			
Berlin Financial (Address)			
(Address)			
1325 Car	negie /	tve, 3rd FZ	
Cleveland			
(Cit	ty <b>/</b> State/Zip/Pho	ne #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Du	Siliess Ellity N	arrie)	
(Danis and Nicos Land			
(Document Number)			
Certified Copies	_ Certificate	es of Status	
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J. BRYAN DEC 2 1 2000

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability of	company is: Berlin Financial, Ltd.	
2. The mailing address of the limited	d liability company is: 1325 Carnegie Avenue,	Third Floor,
Cleveland, Ohio 44115		
May 20, 2004	M04000001955	
3. Date of filing/registration in Florida 4. Document number		per
5. The name of the registered agent a Florida Department of State:	and the registered office address as shown on	the records of the
CT Corpora	ation Systems	
	Name	
1200 South	Pine Island Road	19 B
<del></del>	Address	
Plantation, I	Florida 33324	巴里图用
	City, State and Zip	
6. The name and address of the new i	registered agent and/or office:	2004 DEC 13 PM 1: 12  2004 DEC 13 PM 1: 12  DINAMASSEE, FLORIDA
Thomas G. I	Berlin	T9 -
	Name	92 -
C/O Berlin F	Financial, Ltd. 460 Arborview Lane	<b>EQ 7</b>
Florida si	treet address (P.O. Box NOT acceptable)	75
Venice	FL 34292	
	City, State and Zip	
confirmed that after the change or ch and the business office of the register liability company, it is hereby confirm	t organized under the laws of the State of Flonanges are made, the Florida street address of red agent will be identical. Or, in the case of med that the change(s) was/were authorized loompany or as otherwise provided in the articled liability company.	f the registered office f a Florida limited by an affirmative vote of
(Signature of a) member or authorized representa	ative of a member)	
Jennifer W. Berlin, Chief Operating Officer (Printed or typed name of signee)	<u>-</u>	
comply with the provisions of all state and I am familiar with and accept the Chapter 608, F.S. Or, if this docume address I hereby confirm that the lin Thomas 6. Berlin	registered agent and agree to act in this cape tutes relative to the proper and complete per se obligations of my position as registered ag ent is being filed to merely reflect a change is mited liability company has been notified in v	formance of my duties, gent as provided for in n the registered office
(Signature of Registere d Agent)		
Division of Corpo	orations, P.O. Box 6327, Tallahassee, FL	32314

INHS18(10/99)

**FILING FEE: \$25.00**