## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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email address for this business entity to be used for future l report mailings. Enter only one email address please.\*\*

## LLC REGISTERED AGENT CHANGE GLIMCHER MERRITT SQUARE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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FEB 1 8 2015

## COVER LETTER

	Registration Section Division of Corporations	
SUBJE	GLIMCHER MERRITT SQUARE,	LLC
30000		ne of Limited Liability Company
Dear Si	r or Madam:	
The end	losed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning th	is matter to the following:
	Name of Person	
	TV: (A.	<del></del>
	Firm/Company	
	Address	
	City/State and Zip Code	
•	mail address: (to be used for future ann	•
For furti	her information concerning this matter,	please call:
		at ()
	Name of Person	Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:	MAILING ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations
	Clifton Building	P.O. Box 6327
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 323 I4
1	Enclosed is a check for the following	amount:
I	□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
NHS18 (	(2/14)	

## 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.

I. Ne	ame of the limited liability company: GLIMCHER ME	erritt square, li	<u> </u>		
2. (a)	180 BAST BROAD ST, COLUMBUS, OH 43215	(b)			
(1)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	4/7/2005		1823		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	NRAI SERVICES, INC.		_		
	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Sta		र्वेह ज	
	Registered Office Address (MUST BE FLORIDA STREET				
	1200 SOUTH PINE ISLAND ROAD		<b>-</b>		
	PLANTATION, FL	33324	_		
<b>(</b> b)	C T Corporation System  Enter name of NEW Registered Agent and/or NEW Registered	Office address:	-	10 <b>2</b> 0 5 0 5 0 5 0 5 0 5 0 5 0 5 0 5 0 5 0	
	NEW Registered Office Address: 1200 South Pine Island Road		-		
	Plantation .FI	33324			
he cha	imited liability company is not organized under the latinge or changes are made, the Florida street address of will be identical. for, in the case of a Florida limited light authorized by an affirmative vote of the members coles of organization or the operating agreement of the	the registered offic	e and the business office	of the registered	
Signet	ture of a fightier or authorized representative of a member	· ·	Printed or typed name of sig		
l herel rovisi he obli o mere otified	by accept the appointment as registered agent and agens on spirit all statutes relative to the proper and complete igations of my position as registered agent as provide the proper a change in the registered office address, I in writing of this change.  Alfred	ree to act in this cap performance of my a for in Chapter 60, hereby confirm that	acity. I further agree to duties, and I am familia 5, F.S. Or, if this docum the limited liability com	comply with the r with and accept ent is being filed pany has been	
- Griecin	r () Assistant	Secretary	TV 90214		
	Division of Corporations P.O. I	Box 6327• Tallaha: Pp. 695 00	isee, FL 32314		

INHS18 (2/14)