

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000004483

FILED
Aug 20, 2008
Secretary of State

Entity Name: BOYKIN MEDITERRANEE, LLC

Current Principal Place of Business:

45 WEST PROSPECT AVENUE, SUITE 1515
CLEVELAND, OH 44115

New Principal Place of Business:

8015 W KENTON CIRCLE
SUITE 220
HUNTERSVILLE, NC 28078

Current Mailing Address:

45 WEST PROSPECT AVENUE, SUITE 1515
CLEVELAND, OH 44115

New Mailing Address:

8015 W KENTON CIRCLE
SUITE 220
HUNTERSVILLE, NC 28078

FEI Number: 20-5372856 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BOYKIN ENTERPRISES L, IMITED LIABILIT Y CO.
Address: 45 WEST PROSPECT AVENUE, SUITE 1515
City-St-Zip: CLEVELAND, OH 44115

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BOYKIN ENTERPRISES L, IMITED LIABILIT Y CO.
Address: 8015 W KENTON CIRCLE, SUITE 220
City-St-Zip: HUNTERSVILLE, NC 28078

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: ROBERT W. BOYKIN

PRES

08/20/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date