M09000002377

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SEP 2 2010

EXAMINER

10 SEP -2 PH 1: 1.5



CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE: 492790

7478420

AUTHORIZATION : C

COST LIMIT :

ORDER DATE: August 27, 2010

ORDER TIME : 9:55 AM

ORDER NO. : 492790-031

CUSTOMER NO: 7478420

CHANGE OF AGENT

NAME: ST. LUCIE RETAIL 46, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH

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. Name of the limited liability company: ST. LUCIE R	RETAIL 46, LLC	,	
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	pany: <u>110 E.Wilson Bridge Ro</u> <u>Worthington, OH 43085</u>	oad	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
06/22/2009	M09000002377		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown	on the records of the Florid	da Dept. of State:	
Registered Agent:	C T Corporatio System		
Registered Office Address:	1200 South Pine Island Ro	1200 South Pine Island Road	
Rogistorod Office Audioss.	Plantation, FL 33324		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent</u> : <u>Corporation Service Company</u>			
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	1201 Hays Street	
INCOLUDE I DOMENTA STREET ADDRESS	Tallahassee	,FL 32301	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member of authorized representative of a member)			
Blanca Lozada, Authorized Person (Printed or typed name of signee)			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my positions. Or, if this document is being filed to mcrely reflect confirm that the limited liability company has been notification. By: (Simplus of Resistant Accepts)	d agree to act in this capac proper and complete perfoi on as registered agent as p a change in the registered tied in writing of this chang	sity. I further agree to rmance of my duties, and I rnovided for in Chapter 608, office address, I hereby e.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

(Signature of Registered Agent) Grace E. Kirby, Assistant V.P.