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EXAMINER



800214656898

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ACCOUNT NO. : I2000000195

REFERENCE :

032536 7860016

AUTHORIZATION (

COST LIMIT

ORDER DATE: December 20, 2011

ORDER TIME: 10:39 AM

ORDER NO. : 032536-119

CUSTOMER NO: 7860016

CHANGE OF AGENT

NAME: AERC WELLINGTON, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 608.416 or 608.3 company submits the following statement in order to chin the State of Florida. 1. Name of the limited liability company: _AERC WEL	508, Florida Statutes, the undersigned limited Sh ili ange its registered office or registered agent, or how	
1. Name of the limited liability company: AERC WEL	LINGTON, LLC	
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 1 AEC Parkway, Richmond Heights OH 44143	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1 AEC Parkway, Richmond Heights OH 44143	
06/08/2011	M11000002932	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:	
Registered Agent:	C T Corporation System	
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent:	EW Registered Office address: Corporation Service Company	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
	Tallahassee ,FL 32301	
f the limited liability company is not organized under the hat after the change or changes are made, the Florida streetfice of the registered agent will be identical. Or, in the nereby confirmed that the change(s) was/were authorized iability company or as otherwise provided in the articles imited liability company. Maure Cattley	eet address of the registered office and the business case of a Florida limited liability company, it is	
Signature of a member or authorized representative of a member)	_	
Maureen Cathell, 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 pim familiar with and accept the obligations of my positions. S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notificated.	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I n as registered agent as provided for in Chapter 608, then the registered office address, I hereby ed in writing of this change.	

(Signature of Registered Agent) Corporation Service Company Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 **FILING FEE: \$25.00**

Sylvia Queppet, Asst. Vice President