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T. HAMPTON

COVER LETTER

TO:	Registration Division of 0			•
SUBJ	ECT:		th Belcher, LLC Limited Liability Com	
		Name of Foleigh	Limited Liability Com	pany
Dear S	Sir or Madam:			
The er	nclosed applica	ntion, certificate and fee(s) ar	re submitted for filing.	
Please	return all cor	respondence concerning this	matter to the following	;
		Reginald Jordan		
		Name of Person		
	Wa	alter & Haverfield LLP		
		Firm/Company		
	1301 Ea	st Ninth Street, Suite 350	00	
		Address		
	C	eveland, Ohio 44114		
		City/State and Zip Code		
		rjordan@walterhav.com		
E-n	nail address: (t	o be used for future annual r	eport notification)	
For fu	rther informat	ion concerning this matter, p	lease call:	
	Regir	nald Jordan a	at (216)	781-1212
	Nam	e of Person	Area Code & Daytir	ne Telephone Number
	Registration Division of Clifton Build 2661 Execut	Corporations	Regist Divisio P.O. B	AING ADDRESS: ration Section on of Corporations lox 6327 assee, Florida 32314
	sed is a check Filing Fee	for the following amount: \$\int \$30\$ Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status &



Reginald L. Jordan rjordan@walterhav.com 216.619.7846 direct line 216.916.2439 direct fax

July 20, 2012

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Amendment to Application for Authorization to Transact Business in Florida for 455 South Belcher, LLC

Dear Sir or Madam:

Enclosed please find the Amendment to Application for Authorization to Transact Business in Florida form of the above-named entity. Also enclosed is a check in the amount of \$25.00 for the filing fees. Please return receipt of filing to the undersigned.

Very truly yours,

Reginald L. Jordan

Paralegal

/RLJ Enclosures

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1.	Name of limited liability company as it appears on the records of the Florida Department of State: 455 South Belcher, LLC
2.	Jurisdiction of its organization: Ohio
3.	Date authorized to do business in Florida: June 22, 2012
	SECTION II (4-7 complete only the applicable changes)
4.	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? July 2, 2012
5.	New name of the limited liability company: 455 Belcher Road South, LLC (must end with "Limited Liability Company," "L.L.C.," or "LLC.")
F1 th	f name unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting e alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." "LLC.")
6.	If the amendment changes the period of duration, indicate new period of duration:
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
8.	If the amendment corrects any false statement, indicate the statement being corrected and the correction:
9.	Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized. Signature of a member of the authorized representative of a member J. Ryan Williams, Authorized Representative Typed or printed name of signee

Filing Fee: \$25.00





DATE: 07/05/2012 DOCUMENT ID 201218501203

DESCRIPTION LIMITED LIABILITY COMPANY -AMENDMENT (LAM)

FILING 50.00 XPED PENALTY

CERT .00 COPY

Receipt

This is not a bill. Please do not remit payment.

WALTER AND HAVERFIELD LLP 1301 EAST NINTH STREET STE 3500 ATTN R JORDAN CLEVELAND, OH 44114

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

2115137

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

455 BELCHER ROAD SOUTH, LLC

and, that said business records show the filing and recording of:

Document(s)

Document No(s):

LIMITED LIABILITY COMPANY - AMENDMENT

201218501203



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 2nd day of July, A.D.

Ohio Secretary of State



Form 543A Prescribed by: Ohlo Secretary of State ION HUSTED Ohio Secretary of State

Central Ohio: (614) 466-3910 Toll Free: (877) SOS-FILE (767-3453) www.OhioSecretaryofState.gov Busserv@OhioSecretaryofState.gov

Mail this form to one of the following:

Regular Fiting (non expedite) P.O. Box 1329 Columbus, OH 43216

Expedita Filing (Two-business day processing time requires an additional \$100.00).
P.O. Box 1390
Columbus, OH 43216

Domestic Limited Liability Company Certificate of Amendment or Restatement

PH 4: 84

Filing Fee: \$50 (CHECK ONLY ONE (1) BOX) (1) Domestic Limited Liability Company (2) Domestic Limited Liability Company Amendment (129-LAM) Restatement (142-LRA) June 18, 2012 Date of Formation Date of Formation The undersigned authorized representative of. 455 South Belcher, LLC Name of limited liability company 2115137 Registration Number If box (1) Amendment is checked, only complete sections that apply. If box (2) Restatement is checked, all sections below must be completed.

455 Belcher Road South, LLC				
Name must include one of the following words or abbreviations: "limited liability company," "limited," "LLC," "L.L.C.," "ltd." or "ltd"				
is limited liability company shall exist for a period of:	Period of Existence			
Purpose				
his limited liability company shall exist for a period of:				

Form 543A

Page 1 of 2

Last Revised: 1/9/12

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Articles and original appointment of agent must be signed by a member, manager or other representative.

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.

Southender	
Signature	
	_
By (if applicable)	
James M. Mackey, Esq., Authorized Representative	-
Print Name	_
	_
Signature	_
By (if applicable)	_
by (it applicable)	
	_
Print Name	_
	_
Signature	
	_
By (if applicable)	_
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Print Name	

Form 543A

Page 2 of 2

Last Revised: 1/9/12