# MBOOW)282

(Re	questor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



900276065909

08/17/15--01007--004 \*\*35.00



AUG 1 9 2015 S. YOUNG

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: PARK PLACE TECHNOLOGIES, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Samantha Campbell c/o Registered Agent Solutions Inc.

Name of Person

### Registered Agent Solutions Inc.

Firm/Company

1701 Directors Blvd. Suite 300

Address

Austin Tx 78744

City/State and Zip Code

clientservices@rasi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samantha Campbell

. . 888

705-7274

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

**MAILING ADDRESS:** 

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

Enclosed is a check for the following amount:

□ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

INHS18 (12/13)

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

Pursuant to the provisions of sections 605.0114, 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: PARK PLACE TECHNOL	OGIES, LLC	
2. (a) Principal office address of limited liability company:	. FORD LANDED DOOR DRIVE SHITE 300	
(Note: MUST BE STREET ADDRESS)	MAYFIELD HEIGHTS, OH 44124	
division address of the last tabilities assessed	SOLA LANDEDBOOK DOINE CHITE 300	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	6910 LANDERBROOK DRIVE SUITE 300 MAYFIELD HEIGHTS, OH 44124	
(1000 1011 101 101 101 101 101 101 101 1		
01/11/2013	4. Document number	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:	
	-	
Registered Agent:	CORPORATION SERVICE COMPANY	
Registered Office Address:	1201 HAYS STREET	
	TALLAHASSEE, FL 32301-2525	
·		
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NEV</b>	V Registered Office address:	
NEW Registered Agent:	Registered Agent Solutions, Inc.	
<del></del>	,=-,	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Dr.	
MUSI BE FLORIDA STREET ADDRESS!	Tallehassee, FL 32301	
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl	aws of the State of Florida, it is hereby-	
and the business office of the registered agent will be ident	ical. 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 otherwisthe operating agreement of the limited liability company.	se provided in the articles of organization or	
50.01		
Signature of a member or authorized representative of a member	-	
Stelle R. May	<u></u>	
Printed or typed name of signee		
I hereby accept the appointment as registered agent and a	gree to act in this capacity. I further agree to	
and I am familiar with and accept the obligations of my po	sitjon as registered agent as provided for in	
comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my po Chapter 605, F.S. Or, if this document is being filed to me agaress, I hereby confirm that the limited liability company	rety reflect a change in the registered office v has been notified in writing of this change.	
Haclyn (hight Jadyn Wright, A	sst. Secretary	
Signature of Registered Agent	J	
Division of Corporations, P.O. Box 63	27, Tallahassee, FL 32314	

FILING FEE: \$25.00

INHS18 (12/13)

#### **COVER LETTER**

TO: Registration Section
Division of Corporations

URIFICE: PARK PLACE TECHNOLOGIES, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Samantha Campbell c/o Registered Agent Solutions Inc.

Name of Person

## Registered Agent Solutions Inc.

Firm/Company

1701 Directors Blvd. Suite 300

Address

Austin Tx 78744

City/State and Zip Code

clientservices@rasi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samantha Campbell

<sub>41</sub>888

705-7274

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

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

Pursuant to the provisions of sections 605.0114, 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.

00	,	in the state of 1 to tag.		
١.	Nai	me of the limited liability company: PARK PLACE TECHNOLOGY	OGIES, LLC	<del></del>
2	(a)	Principal office address of limited liability company	SOLO LANDEDDDOOM DEINE CHITE 200	
۷.	(a)	(Note: MUST BE STREET ADDRESS)	MAYFIELD HEIGHTS, OH 44124	
		(NOTE MOST BUSINESS)		
	(h)	Mailing address of limited liability company:	5910 LANDERBROOK DRIVE SUITE 300	
	(0)	(Note: MAY BE POST OFFICE BOX)	MAYFIELD HEIGHTS, OH 44124	
01	/11/20	13	M13000000282	
			4. Document number	
				· · · · ·
5.	(a)	Registered Agent and Registered Office shown on t	he records of the Florida Dep	t. of State:
		Registered Agent:	CORPORATION SERVICE COMPANY	12.6 君 而
		Registered Agent.		
		Registered Office Address:	1201 HAYS STREET	
			TALLAHASSEE, FL 32301-2525	· · · · · · · · · · · · · · · · · · ·
	(b)	Enter name of NEW Registered Agent and/or NEV	V Registered Office address	: <u></u>
		NEW Registered Agent:	Registered Agent Solutions, Inc.	()/
		NEW Desistant Office Address	165 Office Diezo Dr	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		MUST RE FLORIDA STREET ADDRESS	155 Office Plaza Dr. Suite A	
		WOOT HE TENNING STREET TOPRESS!	Tallahassee, FL 32301	,FL
an lii th	onfir nd th abili ie m ie op	limited liability company is not organized under the lamed that after the change or changes are made, the Fine business office of the registered agent will be identity company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwiperating agreement of the limited liability company.  The of a member or authorized representative of a member	orida street address of the regical. Or, in the case of a Flor was/were authorized by an a	gistered office ida limited ffirmative vote of
S	telia R.	May		
_		or typed name of signee	-	
I ca a Ca	omp nd I hap dare	eby accept the appointment as registered agent and a ly with the provisions of all statutes relative to the provisions of all statutes relative to the property am familiar with and accept the obligations of my pole to 5.5. Or, if this document is being filed to me as, I hereby confirm that the limited liability company and of Registered Agent	öper and complete përforman sition as registered agent as rely reflect a change in the rë v has been notified in writing	further agree to ice of my dutics, provided for in egistered office of this change.
- 1	/	District Community DA Day Co	AR (P-1) 1 DY 20244	