

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005

REFERENCE: 2016133
(Sub Account)

DATE: 11-16-99

REQUESTOR NAME: LEXIS

ADDRESS: _____

TELEPHONE: (____) (____) ext (____)

CONTACT NAME: _____

CORPORATION NAME: M98-497 LEXFORD GP LLC

DOCUMENT NUMBER: _____
(if applicable)

AUTHORIZATION: C. Woodyard

99 NOV 16 AM 11:45
FILED
TALLAHASSEE FLORIDA
SECRETARY OF STATE

11/17

800003045678--6

☐ CERTIFIED COPY (1-9)
☒ CERTIFICATE OF STATUS (1-9)
☐ PLAIN STAMPED COPY

☒ Call When Ready
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() Call if Problem
() Will Wait

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DEPARTMENT OF STATE
CORPORATIONS
DIVISION

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: LEXFORD GP, L.L.C.
2. The mailing address of the limited liability company is : 6954 AMERICANA PARKWAY
REYNOLDSBURG, OH 43068
3. Date of filing/registration in Florida 05/20/1998 4. Document number M9800000497

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CT CORPORATION SYSTEM
Name
1200 SOUTH PINE ISLAND ROAD
Address
PLANTATION, FL 33324
City, State and Zip

6. The name and address of the new registered agent and/or office:

LEXIS DOCUMENT SERVICES INC
Name
3953 WW KELLY ROAD
Florida street address (P.O. Box NOT acceptable)
TALLAHASSEE, FL 32311
City, State and Zip

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.

Alan Currie

(Signature of a member or authorized representative of a member)

LISA CURRIE

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Rebecca Hester
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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