Entity Name: HBM ARCHITECTS, LLC	
Current Principal Place of Business:	

1382 WEST NINTH STREET, SUITE 300 CLEVELAND, OH 44113

DOCUMENT# M1500008637

### **Current Mailing Address:**

1382 WEST NINTH STREET, SUITE 300 CLEVELAND, OH 44113 US

## FEI Number: 20-3456218

#### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US

# FILED Jan 17, 2018 Secretary of State CC6167392110

Date

Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

TitlePRESIDENTTitlePRINCIPALNameBOLEK, PETER JNameSHOOK, JAMESAddress1382 WEST NINTH STREET, SUITE 300Address1382 WEST NINTH STREET, SUITE 300City-State-ZipCLEVELAND OH 44113City-State-ZipCLEVELAND OH 44113TitlePRINCIPALVVNameKENNEDY, KEVIN AVVAddress1382 WEST NINTH STREET, SUITE 300VVCity-State-ZipCLEVELAND OH 44113VVCity-State-ZipCLEVELAND OH 44113VVCity-State-ZipCLEVELAND OH 44113VV		
Address1382 WEST NINTH STREET, SUITE 300Address1382 WEST NINTH STREET, SUITE 300City-State-Zip:CLEVELAND OH 44113City-State-Zip:CLEVELAND OH 44113TitlePRINCIPALVameKENNEDY, KEVIN ANameKENNEDY, KEVIN AValueValueAddress1382 WEST NINTH STREET, SUITE 300Value	Title PRESIDENT Title PRINCIPAL	
300 300   City-State-Zip: CLEVELAND OH 44113   Title PRINCIPAL   Name KENNEDY, KEVIN A   Address 1382 WEST NINTH STREET, SUITE 300	Name     BOLEK, PETER J     Name     SHOOK, JAMES	
Title PRINCIPAL   Name KENNEDY, KEVIN A   Address 1382 WEST NINTH STREET, SUITE 300		STREET, SUITE
Name KENNEDY, KEVIN A   Address 1382 WEST NINTH STREET, SUITE   300 300	City-State-Zip: CLEVELAND OH 44113 City-State-Zip: CLEVELAND OH 4	14113
Address 1382 WEST NINTH STREET, SUITE 300	Title PRINCIPAL	
300	Name KENNEDY, KEVIN A	
City-State-Zip: CLEVELAND OH 44113		
	City-State-Zip: CLEVELAND OH 44113	

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PETER J BOLEK

PRESIDENT

01/17/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date