06/18/2008

DOCUMENT ID 200816901158

DESCRIPTION DOMESTIC AGENT SUBSEQUENT APPOINTMENT (AGS) FILING

EXPED 00

PENALTY

CERT

COPY

Receipt

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

MYSTIC POINT DEV 1790 ENTERPRISE PKY TWINSBURG, OH 44087

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

1020998

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

MYSTIC POINTE DEVELOPMENT HOMEOWNER'S ASSOCIATION, INC.

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

Document(s)

Document No(s):

DOMESTIC AGENT SUBSEQUENT APPOINTMENT

200816901158



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 16th day of June, A.D. 2008.

مصنعب درما

Ohio Secretary of State



www.sos.state.oh.us e-mail: busserv@sos.state.oh.us

Prescribed by: The Ohio Secretary of State Central Ohio: (614) 466-3910 Toll Free: 1-877-SOS-FILE (1-877-767-3453)

Expedite 1	his Form: (Select One)]
Mail Form (o one of the Following:	
	PO Box 1390	
Yes	Columbus, OH 43216	
*** Requi	es an additional trato \$1904"	
O	PO BOX VIESS SECTION	YED .
O _{No}	Columbus, OH 43216	S DIVISION
	D co	MANGIAL

STATUTORY AGENT UPDATE

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AUID BEC	RETARY OF E	
	- WAY OF E	TATE

HE UNDERSIGNED DES		ILE A:			
(CHECK ONLY ONE (1) E		Lavor con	· læ		
Subsequent Appointme Corp LP (165		(2) Change of Addre Corp LL LLC (144-LAD)	P (145-AGA)	esignation of Age Corp L LLC (153-LAG)	ent P (155-AGR)
omplete <u>ALL</u> of the genera	al informatio	n in this section for the bo	x checked above.		
ame of Entity	MYSTIC	POINTE DEVELO	рмент Ном Еош	uens Associ	ATTION INC.
harter or legistration No.	/02	0998			
lame of Current Agent _	JAU	L PERELYM			
omplete the information in	this section	if box (1) is checked.			
ame and Address of			ACI FON		
lew Agent			TERPRISE PARK	1. 19.1	
			: P.O. Box Addresses are		
		TWINSBURL	C. AINT	NOT acceptable.	141007
		(City)	SUMM IT (County)	Ohio (State)	(Zip Code)
	1	ACCEPTANCE OF A	PPOINTMENT		
he Undersigned,	LISA	KALIFON			amed herein as
e Statutory agent for,	MYSTIC	POINTE DEVELOPME	M HOMEDWHERS F	SSOC TNC hereby ackno	wledges and
ccepts the appointment of			. 0		·
		Signature:	Man /	Like	
			(Statutory Agent)	$\overline{}$	
the entity listed is an Or	nio Domestic	, the agent must sign the	Acceptance of Appo	intment	
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Page 1 of 3

Last Revised: May 2002

	if box (2) is chec				
Old Address of Agent	(Street)	NOTE: PO	Pov Addronos	n MOT nocentable	
	(Oneel)	NOTE: P.U.	שנע Auuresses ar	e NOT acceptable.	
	(Cit.d		Ohio	- 	
	(City)		(State)	(Zip Code)	
New Address of Agent					
	(Street)	NOTE: P.O.	Box Addresses ar	e NOT acceptable.	
			Ohio		
	(City)		(State)	(Zip Code)	
Complete the information in this section i	f box (3) is ched	ked.			
Is this agent resigning?	Yes		□ No		
	163		E 140		
Current or last known address of the entity's principal office	(Street)	WOTE: 0.0	Dan Add	- NOT	
where a copy of this Resignation	(Street)	NUIE: P.O.	DUX AUGRESSES AN	e NOT acceptable.	
of Agent was sent as of the date of filing or prior to the date filed	(C4.)				
or filling or prior to the date filed	(City)		(State)	(Zip Code)	
		Ray V.	01		4 halox
REQUIRED Must be authenticated (signed) by an authorized representative (See Instructions)	Au	Row Ka thorized Repre	L — esentative		6 /12-/08 Date
Must be authenticated (signed) by an authorized representative	Au	thorized Repre	esentative		1.0 700
Must be authenticated (signed) by an authorized representative	Au	Row Ku thorized Repre	Lesgnitative		1.0 700
Must be authenticated (signed) by an authorized representative	Au	Row Ka thorized Repre	esentative		1.0 700
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Must be authenticated (signed) by an authorized representative	Au	Box Ka thorized Repre	La contractive		1.0 700