

DATE: 10/01/2012

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DESCRIPTION AGENT RESIGNATION (AGR) FILING

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BUCKINGHAM, DOOLITTLE & BURROUGHS, LLP ATTN: TIMOTHY J. MCELDOWNEY 3800 EMBASSY PKWY STE 300 AKRON, OH 44333

## STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

1809479

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

GREENE ARCHES 4962, INC.

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

Document(s):

AGENT RESIGNATION

Document No(s):

201227201093



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 27th day of September, A.D. 2012.

Ohio Secretary of State

From: 330 Page: 17/28 Date: 9/27/2012 11:43:10 AM



Form 521 Prescribed by: JON 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:

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## Statutory Agent Update Filing Fee: \$25

(CHECK ONLY ONE(1) BOX)		
(1) Subsequent Appointment of Agent		
Corp (166-AGS)		
☐ LP (165-AGS)		
LLC (171-LSA)		
Business Trust (171-LSA)		

I	(2) Cha	nge of Address of an Agent
		Corp (145-AGA)
		LP (145-AGA)
		LLC (144-LAD)
		Business Trust (144-LAD)

(3) Resigi	nation of Agent Corp (155-AGR)
	LP (155-AGR)
	LLC (153-LAG)
	Partnership (153-AGR)
	Business Trust (153-LAG)

Name of Entity Gr	eene Arches 4962, Inc.		
Charter, License o	Registration No. 1809479		
Name of Current A	gent BDB Agent Co.		22
			2012 \$
Complete the inforn	nation in this section if box (1) is check	ed	SEP 2
Name and Address of New Agent			
OI Maw y@aur	Name of Agent		112:
			30
	Mailing Address		
		Ohio	
	City	State	Zip Code

Form 521

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Last Revised: 2/6/12

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<b>О ФР</b> Л <b>Д</b> (1 — <b>Д</b> О 3 <b>Д</b> — 1	From: 330 Pag	e: 18/28	I1:43:10 AM, , ,	V12 11 1V
Complete the Info	rmation in this section if box (	1) is checked and busines	s is an Ohio entity	
	ACCEPTANCE OF APPOI	NTMENT FOR DOMESTIC	ENTITY'S AGENT	
			nan	ned herein as the
The Undersigned,	Name of Agent		, par	lien lietelii sa ma
statutory agent for	Name of Business Entity		, here	eby acknowledges
and accepts the ap	pointment of statutory agent for	said entity.		
	Şi	gnature:		
		Individual Agent's Sign	nature/Signature on beh	alf of Corporate Agent
	n agent is an Individual using Ohio resident.	a P.O. Box, the agent mus	it check this box to co	onfirm that the agent is
Complete the Info	rmation in this section if box (	(2) is checked		
New Address of Ag	Mailing Address			
	City		Ohio J State Ži	p Code
	n agent is an Individual using Ohio resident.	a P.O. Box, the agent mus	t check this box to co	nfirm that the agent is
Complete the info	rmation in this section if box (	3) is checked		
The agent of record	for the entity identified on page	1 resigns as statutory agent	<b>l.</b>	
Current or last knov date of filing or prior	vn address of the entity's princip r to the date filed.	al office where a copy of this	Resignation of Agent v	was sent as of the
	Greene, 154 E, Aurora Road			
Mailing A	Address			
Sagamo	re Hills	Ohio	44067	
Cily		State	Zip Co	

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By signing and submitting this for requisite authority to execute thi	orm to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the sidecument.
Required Agent update must be signed by an authorized representative (see instructions for specific information).	BDB Agent Co. Authorized Representative  By (if applicable)
If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.	Ruth A. Martell, Assistant Secretary Print Name
If authorized representative is a business entity, not an	
individual, then please print the business name in the "signature" box, en	Authorized Representative
authorized representative of the business entity must sign in the "By" box	By (if applicable)
and print their name in the "Print Name" box.	Print Name

Form 521

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