#### 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 04/20/2018

PD

SIGNATURE: SNAVELY, PETER L

Electronic Signature of Signing Officer/Director Detail

# CHAGRIN FALLS. OH 44022

**Current Principal Place of Business:** 

#### **Current Mailing Address:**

7139 PINE STREET, SUITE 110

7139 PINE STREET, SUITE 110 CHAGRIN FALLS. OH 44022

#### FEI Number: 34-1609406

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

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

### **Officer/Director Detail :**

Title	PD	Title	D
Name	SNAVELY, PETER L	Name	SNAVELY, JOHN P
Address	7139 PINE STREET, SUITE 110	Address	7139 PINE STREET, SUITE 110
City-State-Zip:	CHAGRIN FALLS OH 44022	City-State-Zip:	CHAGRIN FALLS OH 44022

FILED Apr 20, 2018 Secretary of State CC0343100598

Certificate of Status Desired: No

Date

## DOCUMENT# F05000004913

Entity Name: SNAVELY BUILDING COMPANY