



DATE: 09/21/2011	DOCUMENT ID 201126301069	DESCRIPTION DOMESTIC AGENT SUBSEQUENT APPOINTMENT (AGS)	FILING 25.00	EXPED .00	PENALTY	CERT .00	COPY .00
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Receipt

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

BAY SHORELINE, INC.
45 NORTH FOURTH STREET
SUITE 200
COLUMBUS, OH 43215

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

866522

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
BAY SHORELINE, INC.

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

Document(s)

DOMESTIC AGENT SUBSEQUENT APPOINTMENT

Document No(s):

201126301069



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 September,
A.D. 2011.

Ohio Secretary of State

Last Revised: 12/01/2008

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.		
REQUIRED Must be authenticated (signed) by an authorized representative (See Instructions)	Authorized Representative	SEPT 13, 2011
	ANDREW E SHOWE	Date
	Print Name	
		9/15/11
	Authorized Representative	Date
	ANDREW SHOWE	
	Print Name	



**Form 521 Prescribed by the:
Ohio Secretary of State**

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)

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RECEIVED

STATUTORY AGENT UPDATE

Filing Fee: \$25

SEP 16 2011

(CHECK ONLY ONE (1) BOX)

SECRETARY OF STATE

(1) Subsequent Appointment of Agent ☒ Corp (165-AGS) ☐ LP (165-AGS) ☐ LLC (171-LSA)	(2) Change of Address of an Agent ☐ Corp (145-AGA) ☐ LP (145-AGA) ☐ LLC (144-LAD)	(3) Resignation of Agent ☐ Corp (155-AGR) ☐ LP (155-AGR) ☐ LLC (153-LAG) ☐ Partnership (155-AGR)
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Name of Entity BAY SHORELINE INC

Charter, License or Registration No. 866522

Name of Current Agent JOSEPH J RECCHIE

Complete the information in this section if box (1) is checked

Name and Address of New Agent ANDREW E SHOWE

Name of Agent ANDREW E SHOWE

Mailing Address 45 NORTH 4TH STREET SUITE 200

City COLUMBUS **State** Ohio **Zip Code** 43215