MICOCOCOCH

| (Requestor's N | lame) | | | |
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| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip | /Phone #) | | | |
| PICK-UP WA | AIT MAIL | | | |
| (Business Ent | ity Name) | | | |
| (Document Number) | | | | |
| Certified Copies Cert | ificates of Status | | | |
| Special Instructions to Filing Office | er: | | | |
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Office Use Only



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B. BOSTICK

NOV - 5 2013

EXAMINER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Alex Smetana

Date: October 30, 2013

Order#: 819392-313

Re: ELON PROPERTY MANAGEMENT COMPANY - LEXFORD POOLS 1/3,

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Alex Smetana

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| 1. Nar | me of the limited liability company: ELON PROPERTY M. | ANAGEMENT COMPANY - LEX | FORD POO | DLS 1/3, L.L.C | <u>. </u> |
|---|---|---|--|---|--|
| 2. (a) | Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) | 333 Earle Ovington Boul Suite 900 Uniondale, NY 11553 | evard | | |
| (b) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | 333 Earle Ovington Boul Suite 900 Uniondale, NY 11553 | evard | | |
| 12/01/2 | 2011 | M11000006014 | | | |
| | | 4. Document number | | | |
| 5. (a) | Registered Agent and Registered Office shown on t | he records of the Florida | a Dept. | of State: | |
| . , | Registered Agent: | C T Corporation System | | | |
| | Registered Office Address: | 1200 South Pine Island I Plantation, FL 33324 | Road | CT: | <u> </u> |
| (b) | Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u> | V Registered Office ad | drėss: | 4-10 | , |
| | NEW Registered Agent: | Corporation Service Con | npany | | •• |
| NEW Registered Office Address: | NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 1201 Hays Street | (0:381) | - हिं | |
| | MUST BE FEORIDA STREET ADDRESS | Tallahassee | <u>'</u> | ,FL <u>32301</u> | |
| confirmand the liabilit the me the open | imited liability company is not organized under the lamed that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise trating agreement of the limited liability company. | orida street address of the cal. Or, in the case of a | he regis i Florida | tered offic a limited | |
| | Priebe, Authorized Person or typed name of signee | - | | | |
| I here comply and I c Chapte addres | by accept the appointment as registered agent and a wwith the provisions of all statules relative to the pro- im familiar with and accept the obligations of my po- er 608, F.S. Or, if this document is being filed to men as, I hereby confirm that the limited liability company | gree to act in this capac per and complete perfo sition as registered agen rely reflect a change in t has been notified in wr | ity. I fi rmance it as pri the regi | urther agro of my dut ovided for stered offi this chang | e to ies, in ce ge. |
| By: Signatur | Linace L. Kubl. re of Registered Agent Corporation Service Company | Grace E. Kirby. Assista | int VP | | |

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00