

A040000001515

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

3/13

Office Use Only



000088724420

03/13/07--01007--007 **27.50

02/21/07--01021--002 **250.00

FILED
2007 MAR -9 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 22, 2007

LAURA L. LIGHTHOLDER
PREMIER CORPORATE SERVICES, INC.
200 WEST ADAMS STREET, STE. 2007
CHICAGO, IL 60606

SUBJECT: EL-AD LAKE SHORE PLAZA LLLP
Ref. Number: A04000001515

We have received your document for EL-AD LAKE SHORE PLAZA LLLP and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a limited liability partnership, but your entity is a limited liability limited partnership. Please complete and return the enclosed blank form(s).

There is a balance due of \$27.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Document Specialist

Letter Number: 507A00013151

PREMIER CORPORATE SERVICES, INC.

200 West Adams Street, Suite 2007
Chicago, IL 60606
(312) 346-3606 (800) 934-2556
Fax: (312) 346-3607

March 2, 2007

VIA REGULAR MAIL

Division Of Corporations
Florida Department Of State
PO Box 6327
Tallahassee, FL 32314

RE: Change of Registered Agent and Office

Dear Sir or Madam:

Pursuant to your letters, enclosed are the revised forms necessary to change the registered agent and registered office for each of the following entities:

1. Tuscany Pointe Condominium Association, Inc.- now executed by the Registered Agent; and
2. El-Ad Lake Shore Plaza LLLP, together with a check in the amount of \$27.50 pursuant to your letter. Please note that the forms you attached were to dissolve the company and we just want to change the agent so I prepared what I hope is the correct form.

I have also attaché copies of your letters as instructed.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,



Laura L. Lightholder

enclosures

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. El-Ad Lake Shore Plaza LLLP
Name of Limited Partnership or Limited Liability Limited Partnership
2. September 22, 2004 3. A04000001515
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

American Information Services, Inc.

Name

One S.E. Third Avenue, 28th Floor

Address

Miami, FL 33131

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

NRAI Services, Inc.

Name

2731 Executive Park Drive, Suite 4

Florida street address (P.O. Box not acceptable)

Weston

FL 33331

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

El-Ad Lake Shore Plaza GP, LLC

Signature of General Partner Shaoul Mishal, Authorized Person

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

NRAI Services, Inc.

Signature of Registered Agent Laura L. Lightholder, Assistant Secretary

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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Name

2731 Executive Park Drive, Suite 4

Florida street address (P.O. Box not acceptable)

Weston

FL 33331

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.
El-Ad Lake Shore Plaza GP, LLC

Signature of General Partner Shaouf Mishal, Authorized Person

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

NRAI Services, Inc.

Signature of Registered Agent Laura L. Lightholder, Assistant Secretary

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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