Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H100002437643)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Ad	dress:	_
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REGISTERED AGENT CHANGE ADMG UNIVERSITY PARTNERS LP

 Certificate of Status
 0

 Certified Copy
 0

 Page Count
 05

 Estimated Charge
 \$35.00

C. LEWIS

NOV 1 0 2010

EXAMINER

RECEIVED 10 NOV -9 PM 2: 48 SECRETARY OF STATE ALLAHASSEE, FLORIO

COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJ	ECT:	admo university partners LP						
	Name of Limit	ADMG UNIVERSITY PARINERS LP d Parmorship or Limited Liability Limited Parmorship						
POCU	DOCUMENT NUMBER: A08000000479							
The enfects) a	plosed Statement of Changes submitted for filing.	c of Registered Office and/or Registered Agent and						
Ploase	etum all correspondence	concerning this matter to:						
		<u></u>						
	Contact Per	ron						
	Flm/Compa	MU						
	t turn comba	ay .						
	Address	444,						
	City, State and Zi	p Code						
	ndenicia@lendms	rkrosidentlel.com						
B-m	ill address: (to be used for futu	re annual report notification)						
For furth	er information concerning	this matter, please call:						
	•	at ()						
N	ame of Contact Person	Area Code and Daytime Telephone Number						
Enclosed	is a \$35.00 check made p	ayable to the Florids Department of State.						
STREET	ADDRESS:	MAILING ADDRESS:						
	on Section	Registration Section						
	of Corporations	Division of Corporations P. O. Box 6327						
Clifton Bu		P. O. Box 0327 Tallahassee, FL 32314						
	661 Executive Center Circle Tallahasses, FL 32314 allahasses, FL 32301							

INHSD4 (01/06)

FILED

2010 NOV -9 AM & 05

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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, Plorida Statutes, the undersigned limited partnership or limited Bability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Plorida.

1	ADMG U	NIVERSITY hip or Limited		
2.	4/30/2008		4	A08000000479
	te of filing/registration in Florida		٠,	Florida dogument number
	o of the registered agent and the		e addross a	s shown on the records of the Flo
	L	ubeck, josi	BPH	
	<u> </u>	Name	,	
	825 F	ARKWAY ST	rste 4	
		Address		
		JPITER FL 33		
	C	Sty, State and I	Zip	
5. The name	and Florida atrest address of the	now rogistered	agent and	for afficut
	CT	Corporation Sy	ystem	
		Name		
	1200 Se	ooth Pine listen	d Road	
	Florida street ad	iress (P.O. Bo	x not accep	(ablo)
	Plentati	on,	FL_	33324
	ä	ty, State and Z	íp	
. Such olun;	go(s) in a saffective when filed by	y the Florida D) Cepartmont	of State.
That	mention .	, sigo	ing on b	shalf of general partner
gnature of C	ionoral Pariner	- DHG	tnji vero:	TMY QP, LLC
imply with the dead of the second	of the appointment as registered a te provisions of all statutes relatively with an except the obligations of the collections o	e to the prope	r and comp n <u>ot</u> registe necess	liste performance of my duties.
Hag Fee:	\$35,00 ppy (optional): \$52,50			

POWER OF ATTORNEY

NOTICE IS HEREBY GIVEN THAT WILL of ELCO ("the Corporation"), a Corporation formed under the laws of Delaware and of the subsidiary entities shown on the list appended hereto does hereby appoint Barbara Burka and Madonne Cuddiny as attorney-in-fact for the Corporation and for the subsidiary entities to act for the Corporation and for the subsidiary entities and in the name of the Corporation and of the subsidiary entities for the limited purposes authorized herein.
The Corporation and the substitiary entities, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to change the Corporation's and the substitizity registered agent and registered office, or the agent and office of similar import, in any state.
In the execution of any documents necessary for the purposes set forth herein, Medonna Cuddity shall exercise the power of Viba President (or Member/Manager for an LLC) and Anthony LiCausi shall exercise the power of Sacretary (or Member/Manager for an LLC).
This Power of Attorney expires when revoked by Officer of the Corporation.
IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this <u>U</u> day of <u>ad-oble-</u> 2000-2010
ELCO By Authorized Person: Title: CFO
STATE OF FL) 59 SOUNTY OF HILLS BOROUGH)
subscribed and sworn to before me this A day of October 2000 10
MAYA DANIELB MY COMMISSION & EE arting 19 EXPERCE September 20, 2014 bonded Tary Neary Public Undownless

ADMIG 191 GP, LLC
ADMIG 191 PARTINERS, LP
AOMIG 191 PARTINERS, LP
AOMIG CENTURY MILL GP,
LLC
ADMIG DIPLOMATIC GP, LLC
ADMIG DIPLOMATIC GP, LLC
ADMIG FAIRCAVE PARTINERS LP
ADMIG RIVERVIEW GP, LLC
ADMIG RIVERVIEW PARTINERS LP
ADMIG RIVERVIEW PARTINERS LP
ADMIG UNINVERSITY GP, LLC
ANDMIG UNINVERSITY GP, LLC
CROWN RIDGE PARTINERS, LLC
ELCO LANDMARK
RESIDENTIAL HOLDINGS LLC
ELCO LANDMARK
RESIDENTIAL MANAGENENT
LLC
EPOR INVESTORS LLC
GRAND ISLES AT
BAYMEADOWS, LLC

LAKESIDE NORTH
PARTINERS, LLC
LANDMARK AT GRAND
MEADOW, LLC
LANDMARK AT GRAND
PALNS, LLC
LANDMARK RESIDENTIAL
MANAGEMENT, LLC
ROYAL GOVE PARTINERS,
LLC
ROYAL GREEN PARTINERS,
LLC
SEABREEZE MARINA, LLC