

A98000001035

EZON, INC  
1100 5TH AVENUE SOUTH  
SUITE 210  
NAPLES, FLORIDA 34102

(City/State/Zip/Phone #)

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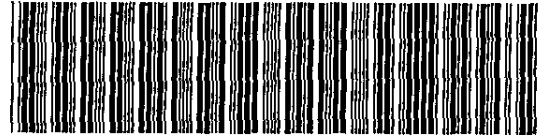
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. HALVORSEN / EZON PARTNERSHIP, LTD.  
Name of the limited partnership

2. 4-28-98  
Date of filing/registration in Florida

3. A 98000001035  
Document number assigned

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

EZON FLORIDA, INC.  
Name  
1100 FIFTH AVE SOUTH STE 401  
Address  
NAPLES, FL 34102  
City, State and Zip

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

GARY E ITTNER  
Name  
1100 FIFTH AVE SOUTH STE 210  
Florida street address (P.O. Box **not** acceptable)  
NAPLES FL 34102  
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

\_\_\_\_\_  
Signature of General Partner

*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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.*

Gary E. Ittner  
Signature of Registered Agent

Make checks payable to Florida Department of State and mail to:  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
Filing Fee: \$35.00

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