

Bob000000300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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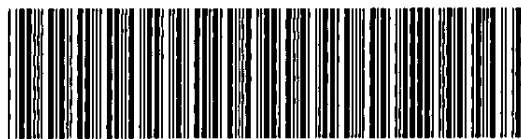
(Business Entity Name)

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11 AUG 31 PM 1:46
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

11 AUG 31 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON
AUG 31 2011
EXAMINER



CORPORATION SERVICE COMPANY'

ACCOUNT NO. : I20000000195

REFERENCE : 860048 7830453

AUTHORIZATION

COST LIMIT : \$ 35.00

[Handwritten signature]

ORDER DATE : July 27, 2011

ORDER TIME : 10:51 AM

ORDER NO. : 860048-103

CUSTOMER NO: 7830453

CHANGE OF AGENT

NAME: OLY-IDA LAKE GRAY APARTMENTS
LP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS: _____

**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. OLY-IDA LAKE GRAY APARTMENTS LP

Name of Limited Partnership or Limited Liability Limited Partnership

2. 07/28/2006

Date of filing/registration in Florida

3. B06000000300

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:

NRAI Services, Inc.

Name

515 E. Park Avenue

Address

Tallahassee, FL 32301

City, State and Zip

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

Corporation Service Company

Name

1201 Hays Street

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

Tallahassee

FL 32301

City, State and Zip

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

Maureen Cathell

Signature of General Partner

Maureen Cathell, Authoized Person on behalf of Oly-Ida Lake Gray LLC, its 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.

Corporation Service Company

By: Grace E. Kirby

Signature of Registered Agent Grace E. Kirby, Assistant VP

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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