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八章 第二。ELIZABETH MORGAN & ASSOCIATES, LLP

18 March 2015

Florida Department of State Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re:

Elizabeth Morgan & Associates, LLP

Document No. B14000000237

Dear Sir or Madam:

I am enclosing the original and a copy of the following documents for filing in connection with the referenced entity:

- 1. Amendment to Certificate of Authority for Foreign LLP and
- 2. Statement of Change of Registered Office/Agent.

I am also enclosing two checks made payable to the Florida Department of State. One check is in the amount of \$52.50 for the Amendment to Certificate of Authority filing fees, and the other check is in the amount of \$35.00 for the Statement of Change of Registered Office/Agent filing fees.

Please file both forms and file-mark the copy of each document. I ask that you return the file-marked copies in the envelope provided for this purpose.

Thank you for your attention to this matter. Please do not hesitate to call us if you have any questions.

Kind regards.

Cicery R. Adkins cadkins@emalegal.com 512.767.7148 Direct

Enclosures

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Elizabeth Morgan & Associate	s, LLP r Limited Liability Limited Partnership
DOCUMENT NUMBER: B14000000237	
The enclosed Statement of Change of Registe fee(s) are submitted for filing.	red Office and/or Registered Agent and
Please return all correspondence concerning the	his matter to:
Cicely Adkins Contact Person	
Elizabeth Morgan & Associates, LLP	
Firm/Company	
10415 Morado Cirlce, Building 1, Suite 310 Address	
Austin, Texas 78759 City, State and Zip Code	
cadkins@emalegal.com E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter	r, please call:
Cicely Adkins	at (512) 767-7148
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	he Florida Department of State.
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

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. Elizabeth Morgan & Associates, LLP	
Name of Limited Partnership or Limited Liability Limited Partnership	
2. October 14, 2104 Date of filing/registration in Florida 3. B1400000237 Florida document number	
4. The name of the registered agent and the registered office address as shown on the records of the Flor Department of State:	ida
Jill Creager	
Name	
c/o Providence Family Offices LLC, 202 S Rome Ave, Ste. 150	
Address	
Tampa, Florida 33606	
City, State and Zip	
5. The name and Florida street address of the new registered agent and/or office:	
Incorporating Services, Ltd.)
Name	
1540 Glenway Drive	
Florida street address (P.O. Box not acceptable)	3
Talahassee FL 32301	
City, State and Zip	
Such change(s) is/are effective when filed by the Florida Department of State.	
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 an accept the obligations of my position as registered agent.	
, Assistant Secretary	
Signature of Registered Agent	

\$35.00

Filing Fee:

Certified Copy (optional): \$52.50