

BI7000000047

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6343
From: Account Name : GREENSPOON WARDER, P.A.
Account Number : 076064603722
Phone : (954) 491-1120
Fax Number : (954) 343-6962

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

Email Address: jmillers@elrhinvestments.com

REGISTERED AGENT CHANGE
LANDINGS AT LAKE GRAY LP

Table with 2 columns: Description and Amount. Rows include Certificate of Status (0), Certified Copy (1), Page Count (01), and Estimated Charge (\$87.50).

Vertical stamps: 2017 AUG 24 PM 5:38, 2017 AUG 24 AM 10:59, FILED, FALL AHASSEE, FL ORIGIN

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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. Landings at Lake Gray LP
Name of Limited Partnership or Limited Liability Limited Partnership

2. 02/21/2017 3. B17000000047
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:

Kristi King
Name
Robbins Property Associates LLC, 4890 W Kennedy Blvd Suite 240
Address
Tampa, FL 33609
City, State and Zip

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

Joseph G. Lubeck
Name
11911 US Highway 1, Suite 204
Florida street address (P.O. Box not acceptable)
North Palm Beach, FL 33408
City, State and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6. Such change(s) is/are effective when filed by the Florida Department of State, EMIF LAKE GRAY MANAGEMENT, LLC.

By: [Signature]
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.

[Signature]
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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