2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G41615

Entity Name: ELIAS PROPERTIES, INC.

FILED Oct 19, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

% WILLIAM S MARSHALL 605 EPSILON DRIVE

605 EPSILON DRIVE -P O BOX 2812 PITTSBURGH, PA 152382807

PITTSBURGH, PA 152382807

Current Mailing Address: New Mailing Address:

% WILLIAM S MARSHALL 605 EPSILON DRIVE

605 EPSILON DRIVE -P O BOX 2812 PITTSBURGH, PA 152382807 PITTSBURGH, PA 152382807 US

FEI Number: 25-1444571 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MARSHALL, WILLIAM S. 700 BRICKELL AVE., SUITE 401 ELIAS, SYLVIA D 700 BRICKELL AVE., SUITE 401 MIAMI, FL 33131 MIAMI, FL 33131

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SYLVIA ELIAS 10/19/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete

() Change () Addition ELIAS, NORMAN Name: Name:

605 EPSILON DRIVE Address: Address: City-St-Zip: PITTSBURGH, PA 15238 City-St-Zip:

Title: Title: () Change () Addition () Delete

ELIAS, SYLVIA Name: Name: 605 EPSILON DRIVE Address: Address: PITTSBURGH, PA 15238 City-St-Zip: City-St-Zip:

Title: Title: DV () Delete () Change () Addition

ELIAS, RICHARD Name: Name: 605 EPSILON DRIVE Address: Address: City-St-Zip: PITTSBURGH, PA 15238 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEAN M. HEPNER EΑ 10/19/2009