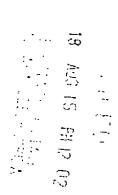
## -L05000/02927

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: MIDA COMMONS,	LLC			
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Reg	istered Office Change and fee(s) are submitted for filing.			
Please return all correspondence cor	ncerning this matter to the following:			
Matthew Kugler				
Name of Pe	rson			
Simon Meyrowitz & Meyrowitz	2, P.C.			
Firm/Comp	any			
355 Lexington Avenue, Suite	401			
Address				
New York, NY 10017				
City/State and 2	Zip Code			
chirsch@milbrookproperties.c	om			
E-mail address: (to be used for	r future annual report notification)			
For further information concerning	this matter, please call:			
Charles Hirsch	516 869-1240			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327			
Enclosed is a check for the	e following amount:			
<b>☑</b> \$25 Filing Fee	\$55 Filing Fee & Certified Copy			

INHS18 (2/14)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY $_{\cdot}$

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. N	ame of the limited liability company: MIDA COMM	ONS, LI	.C					
2. (a)	C/O Milbrook Properties, LTD	(b)	(b) C/O Milbrook Properties, LTD					
2. (8)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	42 Bayview Ave		42 Bayview Ave					
	Manhasset, NY 11030		Manhasset, NY 11030					
	10/19/2005	1	.05000102927					
3.	Date of filing/registration in Florida	4.	Document number					
5. (a)	Pikus, Rubin							
J. (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
304 Grand Key Terrace								
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)								
÷			<u></u> 꼭 ; ; ;					
	Palm Beach Gardens	33418						
	, FL	·	<del></del>					
(b) Hirsch, Charles  Enter name of NEW Registered Agent and/or NEW Registered Office address:  227 Grand Pointe Drive  NEW Registered Office Address:								
						Palm Beach Gardens, FL	33418	
					If the l	imited liability company is not organized under the law	us of the S	tate of Florida, it is hereby confirmed that after
the cha	inflet hability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of	the regist ability con	ered office and the business office of the registered appany, it is hereby confirmed that the change(s)					
the arti	cles of organization or the operating agreement of the	limited li	ibility company.					
	( ) The state of t	Char	les Hirsch					
_	ture of a member of authorized representative of a member		Printed or typed name of signee					
I herei provisi the obl to mere notified	by accept the appointment as registered agent and agrins of all statutes relative to the proper and complete igations of my position as registered agent as provided ly reflect a change in the registered office address, I have a change in the registered office address, I have a change.	ee to act i performa d for in Ci hereby coi	n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept supter 605, F.S. Or, if this document is being filed firm that the limited liability company has been					
Signatu	re of Registered Avent							

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00