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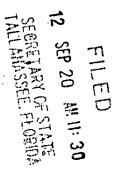
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Office Use Only



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## **COVER LETTER**

то:	Registration Section Division of Corporations					
SUBJ	ELLIOTT  Name of					
				•		
Dear :	Sir or Madam:					
The e	nclosed Registered Agent/Registered	Office (	Change	and t	fee(s) ar	re submitted for filing.
Please	e return all correspondence concerning	this m	atter to	the f	ollowin	g:
	Valerie Rodriguez				<u>.</u> .	
	Name of Person			_		
	•					
	Paracorp Incorporated					
	Firm/Company					
	2004 Cataurau Calca Da # 2	00				
	2804 Gateway Oaks Dr # 2	<u> </u>				
	Sacramento, CA 95833					
	City/State and Zip Code					
E	vrodriguez@myparacorp.co -mail address: (to be used for future annual report	notificati	on)	_		
For fu	urther information concerning this mat	ter, ple	ase cal	1:		
•						
	Valerie Rodriguez	at (_	888	) _		272-5449
	Name of Person			Area C	ode & Da	aytime Telephone Number
	STREET/COURIER ADDRESS:		M	AILIN	G ADD	RESS:
	Registration Section Registration Section					
	vivision of Corporations Division of Corporations					
	Clifton Building	P.O. Box 6327				
	2661 Executive Center Circle Tallahassee, Florida 32314					
	Tallahassee, Florida 32301					
	Enclosed is a check for the followi	ng am	ount:			
	\$25 Filing Fee		□ ¢	55 Fil	ing Fee	& Certified Conv

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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.

1. Name of the limited liability company: Elliott 1	Investment (USA) LLC				
2. (a) Principal office address of limited liability company	Y: UNIT 4-51 TIDEWATER				
(Note: MUST BE STREET ADDRESS)	WAY AS COT WA AUSTRALIA 6104				
(b) Mailing address of limited liability company:	LINITY-51 TIDEWATER WAY				
(Note: MAY BE POST OFFICE BOX)	ASCOT WA AUSTRALIA 610				
5/ 24/2011	L11000061339				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
Registered Agent:	INCORP SERVICES, INC.				
Registered Office Address:	17888 67TH COURT NORTH				
regionates orthographic	LOXAHATCHEE, FL 33470				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>					
<u>NEW</u> Registered Agent:	PARACORP INCORPORATED				
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	236 EAST 6TH AVENUE SET				
III.	TALLAHASSEE JFL323085				
If the limited liability company is not organized under the confirmed that after the change or changes are made, the I and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company.	florida street address of the registered office tical. Or, in the case of a Florida limited by was/were authorized by an affirmative vote rwise provided in the articles of organization				
Signature of a member or authorized representative of a member					
ROBERT CHARLES ELLIOTY	<del>_</del>				
Printed or typed name of signee  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my per Chapter 608, F.S. Or, if this document is being filed to me address, thereby confirm that the limited liability company, Ninh Ho, Asst. Sacreta bignature of Registered Agent	agree to act in this capacity. I further agree to oper and complete performance of my duties, ostition as registered agent as provided for in creative a change in the registered office by has been notified in writing of this change.  Any, Paracorp Incorporated.				