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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
RA change				
Office Use Only				



10/02/13--01014--020 \*\*25.00

FILED 13 OCT -2 PH 1: 25 SECRETARY OF STATE TALLAHASSEE, FLORIDA



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

- From: Alex Smetana
- Date: September 30, 2013
- Order#: 819392-366
  - Re: LEXFORD POOLS 1/3 LLC

Enclosed please find:

XX Change of Registered Agent and Office.
XX Check in the amount of \$25.00.

Please take the following action:

XXFile in your office on a routine basis.XXIssue Proof of Filing.XXPlease return evidence to the following:

Attn: Alex Smetana c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX \_\_\_\_ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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: <u>LEXFORD POOLS 1/3 LLC</u>
- 2. (a) Principal office address of limited liability company: <u>333 Earle Ovington Boulevard</u> (*Note: MUST BE STREET ADDRESS*) Suite 900
  - (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

333 Earle Ovington Boulevard Suite 900 Uniondale, NY 11553

Uniondale, NY 11553

04/03/2013	M1300002089 -	i.
3. Date of filing/registration in Florida	4. Document number	13
5. (a) Registered Agent and Registered Office show	n on the records of the Florida Dep of	State: 1
Registered Agent:	ν <sup>-</sup> Ω	<u>-&gt;</u>
Registered Office Address:	1200 South Pine Island Road	
	Plantation, FL 33324	
	Sm	<u>N</u>
	<b>_</b>	<b>0</b>

## (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>:

NEW Registered Agent:	Corporation Service Company		
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street		
	Tallahassee	.FL 32301	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Dona Priebe, Authorized Person

Printed or typed name of signee

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 statules 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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: Drace C. Kubl

Signature of Registered Agent Corporation Service Company Grace E. Kirby, Assistant VP

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

INHS18 (05/08)