

F11000000278

(Requestor's Name)

(Address)

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(Business Entity Name)

(Document Number)

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*Rosen* *1/10/13*

COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: **Elijah Ltd. Corp**

Name of Corporation

DOCUMENT NUMBER: **F11000000278**

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Kimberly Hoffman**

Name of Contact Person

**Elijah Ltd. Corp**

Firm/Company

**205 W Wacker Dr., Suite 1300**

Address

**Chicago, IL 60606**

City/State and Zip Code

**kim@elijaht.com**

E-mail Address (to be used for future annual report notification)

For further information concerning this matter, please call:

**Kimberly Hoffman**

Name of Contact Person

at **866 354-5240**

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Illinois in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Elijah Ltd. Corp.
2. The principal office address: 205 W. Wacker Dr., Suite 1300, Chicago, IL 60606
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/18/2011 Document number: F11000000278

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)


NORTHWEST REGISTERED AGENT LLC  
3030 N. ROCKY POINT DRIVE, STE 150A  
TAMPA, FL 33607

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

R. CHRISTOPHER NEWTON  
390 NORTH ORANGE AVE, STE 2300  
P.O. Box NOT acceptable  
ORLANDO, FL 32801

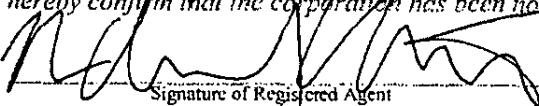
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

Andrew Reisman, President  
\_\_\_\_\_  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
\_\_\_\_\_  
Signature of Registered Agent

01/07/2012  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

R. Christopher Newton  
\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

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TALLAHASSEE, FLORIDA  
STATE  
SECRETARY