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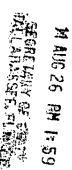
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COVER LETTER

| TO: Amendment Division of | Section Corporations | |
|---------------------------|---|--|
| SUBJECT: | America's Home | Program, Inc. Corporation |
| DOCUMENT NUM | 4BER: P1 | 0000077931 |
| The enclosed Staten | nent of Change of Registered Off | ce/Agent and fee are submitted for filing. |
| Please return all cor | respondence concerning this matt | er to the following: |
| - | Sean Do Name of C | nnelly, Esq. ontact Person |
| - | America's Hor | ne Program, Inc. |
| | rmuv | Company |
| | P.O. B | ox 13413 |
| | Ac | dress |
| | Tămpa, | FL 33681 and Zip Code |
| - | City/State | and Zip Code |
| -7 | sean@americash E-mail address: (to be used for | nomeprogram.com future annual report notification) |
| For further informat | ion concerning this matter, please | e call: |
| | Sean Donnelly e of Contact Person | at (813) 977-2727 x301 Area Code & Daytime Telephone Number |
| | corcontact retson Check made payable to the Depa | |
| | 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 Florida in order to change its registered office or registered agent, or both, in the State of Florida. | |
|---|---------|
| 1. The name of the corporation: America's Home Program, Inc. | |
| 2. The principal office address: 4301 Bayshore Blvd., Tampa, FL 33611 | _ |
| 3. The mailing address (if different): P.O. Box 13413, Tampa, FL 33681 | |
| 4. Date of incorporation/qualification: 09/23/10 Document number: P10000077931 | ·- |
| 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) | |
| Valdis Silins | |
| 100 1 Dayonord Diva. | Š |
| Tampa, FL 33611 | EE 6 2 |
| 6. The name and street address of the new registered agent (if changed) and for registered office | 26 77 - |
| Sean Donnelly, Esq. | 1 () |
| 4301 Bayshore Blvd. | , |
| P.O. Box NOT acceptable | |
| 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 charge 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. | |
| Mark Sanders, Pres. Signature of an officer or director 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 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 | |
| If signing on behalf of an entity: | |
| Typed or Printed Name | |

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