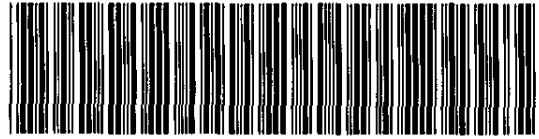


F06000005534



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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 09-26-2012

NAME: HARBORCHASE OF TAMARAC INC

TYPE OF FILING: CHANGE OF REGISTERED AGENT

COST: \$35

RETURN:

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



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 Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: HARBORCHASE OF TAMARAC, INC.
2. The principal office address: 1440 Highway A1A Vero Beach FL 32963
3. The mailing address (if different): _____
4. Date of incorporation/qualification: August 23, 2006 Document number: F06000005534
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)

F & L CORP.

ONE INDEPENDENT DRIVE, SUITE 1300

JACKSONVILLE, FL 32202

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

National Corporate Research, Ltd., Inc.

155 Office Plaza Drive

P.O. Box NOT acceptable

Tallahassee, FL 32301

12 SEP 26 PM 4: 15
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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.

T. Mitchell
Signature of an officer or director

Thomas Mitchell Treas
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]
Signature of Registered Agent

9/25/2012
Date

If signing on behalf of an entity:

Lucy Dawson, Assistant Secretary
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314