Requestor's Name  Address  City/State/Zip Phone #  CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):	<b>-0</b> 1 .00
1. (Corporation Name) (Document #)  2. (Corporation Name) (Document #)	
3. (Corporation Name) (Document #)  4. (Corporation Name) (Document #)	APPROVE
Walk in Pick up time Certified Copy  Mail out Will wait Photocopy  Certificate of Status  NEW FILINGS  Profit Amendment  NonProfit Resignation of R.A., Officer/Director  Limited Liability Change of Registered Agent	Ů,
Domestication Other Dissolution/Withdrawal Other  OTHER FILINGS REGISTRATION/	-
Annual Report Fictitious Name Name Reservation  Limited Partnership Reinstatement Trademark Other	

CR2E031(1/95)

Examiner's Initials

## Florida Department of State, Sandra B. Mortham, Secretary of State

## 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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: SHCC Services, Inc.	
2. The mailing address of the corporation is: 500 Winderley Place, Su	nite 115, Maitland, FL 32751
3. Date of incorporation/qualification: October 19, 1983 Doc	ument number: 768678
4. The name and address of the current registered agent and office:  T. L. Trimble  111 North Orlando Avenue  Winter Park, FL 32789	
5. The name and address of the new registered agent and office: (P. O  J. Darin Stewart  111 North Orlando Avenue  Winter Park, FL 32789	Box Not Acceptable)  SECHETARY  AHASSE
The street address of its registered office and the street address of the agent, as changed, will be identical.  Such change was authorized by resolution duly adopted by its board cauthorized by the board.	business office of its registered
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Ariel De Prada, Assistant Secretary	, ,
(Printed or typed name and title)	(Date)
Having been named as registered agent and to accept service of processory of the appointment as registered agent and further agree to comply with the provisions of all statutes relative to to performance of my duties, and I am familiar with and accept the obligagent.  (Signature of Registered Agent)	agree to act in this capacity. I he proper and complete
If gioning on hohalf of an autitus	
If signing on behalf of an entity:	•
J. Darin Stewart (Typed or Printed Name)	Attorney
(13 ped of 11 lifted Hame)	(Capacity)