

# F03000001410

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : NRAI CORPORATE SERVICES, INC. - IRVINE  
Account Number : I20080000054  
Phone : (949) 955-9585  
Fax Number : (800) 562-6504

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

REGISTERED AGENT CHANGE  
RAINBOW HOUSING ASSISTANCE CORPORATION

Certificate of Status	0
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TBrown 7-8-11

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** RAINBOW HOUSING ASSISTANCE CORPORATION  
Name of Corporation

**DOCUMENT NUMBER:** F03000001410

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:

NICOLE PARNELL  
Name of Contact Person

NRAI CORPORATE SERVICES, INC.  
Firm/Company

2875 MICHELLE DRIVE, SUITE 100  
Address

IRVINE, CA 92606  
City/State and Zip Code

macs@nrai.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICOLE PARNELL at ( 800 ) 562-6439  
Name of Contact Person 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 CALIFORNIA in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: RAINBOW HOUSING ASSISTANCE CORPORATION
- 2. The principal office address: 275 BATTERY STREET, SUITE 500  
SAN FRANCISCO, CA 94111
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 03/21/2003 Document number: F03000001410
- 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)

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
- NRAI SERVICES, INC.  
515 EAST PARK AVENUE  
P.O. Box NOT acceptable  
TALLAHASSEE, FL 32301


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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.

 JOSE CASTELLANOS  
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.*

NRAI SERVICES, INC.  
 by:  7/7/11  
Signature of Registered Agent Date

If signing on behalf of an entity:  
Nicole Chouinard, 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  
 CR2E045 (8/05)