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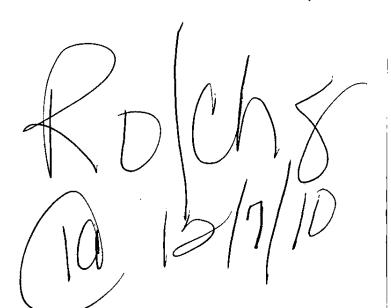
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TALLARIASSEE FLURIDA



COVER LETTER

SUBJECT: SunCastles Restorations, Inc. Name of Corporation DOCUMENT NUMBER: F25829 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: Stuart R. Pursley Name of Contact Person SunCastles Restorations, Inc. Firm/Company 14 East Washington Street, Ste. 600-F Address Orlando, FL 32801-2425 City/State and Zip Code scresp@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Stuart R. Pursley Name of Contact Person at (407) 425-816 Area Code & Daytime Telephone Enclosed is a \$35.00 check made payable to the Department of State.			
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Stuart R. Pursley at (407) 425-810 Name of Contact Person Area Code & Daytime Telephone	,		
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Name of Contact Person Area Code & Daytime Telephone	<u> </u>		
Enclosed is a \$35.00 check made payable to the Department of State.	ephone Number		
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 Circ Tallahassee, FL 32301	er Circle		

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: SunCastles Restorations, Inc.
2. The principal office address: 14 East Washington Street, Ste. 600-F
Orlando, FL 32801-2425
3. The mailing address (if different): same as above
4. Date of incorporation/qualification: 03/18/1981 Document number: F25829
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)
Stuart R. Pursley
250 N. Orange Ave., Ste.1250A
Orlando, FL 32801
250 N. Orange Ave., Ste.1250A Orlando, FL 32801 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Stuart R. Pursley
Stuart R. Pursley
14 East Washington Street, Ste. 600-F
P.O. Box NOT acceptable Orlando, FL 32801-2425
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 bas been notified in writing of the change.
Signature of ear officer or director Stuart R. Pursley 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 charge in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
11/30/10 Signature of Registered Agent Date
If signing on behalf of an entity:
Stuart R. Pursley 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

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