## F9900006704

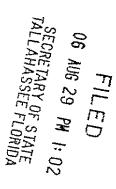
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

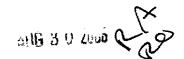
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## TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

HOMEGIN OUTO INC			
SUBJECT: HOMES IN OHIO, INC.  (Name o	f corporation)		
DOCUMENT NUMBER: F99000006704			
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to	to the following:		
Ms. Sue Sommers (Name	of person)		
Homes in Ohio, Inc.	irm/company)		
9 Corporation Center (Ac	idress)		
	•		
Broadview Heights, Ohio 44147			
For further information concerning this matter, please ca	and zip code) dl:		
David A. Fegen (Name of person)	at ( 440 ) 716-1770 (Area code & daytime telephone number)		
Enclosed is a \$35.00 check made payable to the Departm	nent of State.		
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399		

CR2E045(09/03)

## , STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, change is submitted for a corporation organized under the to change its registered office or registered agent, or both,	laws of the State of Ohio	is statement of in order
1. The name of the corporation: HOMES IN OHIO, INC	<b>7</b>	
2. The principal office address: 9 CORPORATION CEN BROADVIEW HEIGHTS, OHIO 44147	TER	MANUAL AL AL
. , , , , , , , , , , , , , , , , , , ,		
4. Date of incorporation/qualification: 12/28/1999	Document number: F99000006704	
<ol><li>The name and street address of the current registered age Florida Department of State:</li></ol>	ent and registered office on file with the	
Corporation Service Company		
1201 Hays Street	• • • • • • • • • • • • • • • • • • • •	
Tallahassee, FL. 32301-2525		
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered office	O6 NU6 SECRET
DANIEL E. INKS	. 44 1/44444 5	SA N L
1225 N. WICKHAM ROAD	Office 3100 and the last of th	SEE FI
MELBOURNE, FL. 32935	ailbox NOT acceptable)	1: 02 STATE LORID
The street address of its registered office and the street a changed will be identical.	address of the business office of its registere	ed agent, as
Such change was authorized by resolution duly adopted the board or the corporation has been notified in writing	by its board of directors or by an officer so	authorized by
(Signature of an officer or director)	Daniel E. Inks, President (Printed of typed name and titl	c)
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statu duties, and I am familiar with and accept the obligation being filed merely to reflect a change in the registered obeen notified in writing of this change.	ites relative to the proper and complete per	formance of my this document is poration has
(Signature of Registered Agent)	August 7, 2006 (Date)	· · · · · · · · · · · · · · · · · · ·
If signing on behalf of an entity:		
Daniel E. Inks	individual	
(Typed or Printed Name)	(Capacity)	

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