H-37486

(Requestor's Name)						
(Ac	Idress)	····				
,	,					
(Ac	ldress)					
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
(CC	cament Namber)	·				
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						
	g ••					

Office Use Only

7.30



900188925149

12/27/10--01053--026 **35.00

BECHE FIRM OF STATE

9 BDEC 27 AM 9: 39

COVER LETTER

TO:	Amendment Section Division of Corporations	3		
SUBJ	ЕСТ:	ALPHA HON Name of C	IES, INC.	
DOCU	UMENT NUMBER:		H37486	
The er	nclosed Statement of Chan	ge of Registered Offic	ce/Agent and fee ar	e submitted for filing.
Please	return all correspondence	concerning this matte	r to the following:	
		Daniel Name of Co	Molloy ontact Person	
			& James	
		riiiic	ompany	
		325 S. E	Boulevard	
	•	Ade	iress	
		Tampa, City/State a	FL 33606 nd Zip Code	
	E-mail addr	ess: (to be used for	future annual rep	ort notification)
For fu	rther information concerni	ng this matter, please	call:	
	Daniel L. M	ollov	at (813	254-7157
	Name of Contact		Area Code	254-7157 & Daytime Telephone Number
Enclos	sed is a \$35.00 check made	e payable to the Depa	rtment of State.	
	Amend Divisio P.O. Bo	Address: ment Section n of Corporations ox 6327 ssee, FL 32314	Ameno Divisio Cliftor 2661 E	Address: Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301

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

	provisions of sections 607. ange is submitted for a corp			
in orde	er to change its registered (office or registered	agent, or both, in the State	e of Florida.
1. The name of	the corporation: Alpha I	Homes, Inc.		· · · · · · · · · · · · · · · · · · ·
2. The principal	office address: 9950 Pri	ncess Palm Av	e., Suite 212, Tampa	, FL 33619
		·		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification:	01/10/1985	_ Document number:	H37486
	d street address of the curre rtment of State: (If resigned		and registered office on fi	le with the
	Sara Flint			
	6522 Gunn Hwy			
·	Tampa, FL 33625			\$\frac{1}{2} \text{2}
6. The name and (if changed):	d street address of the new	registered agent (if	changed) and /or registere	DEC 27
	Daniel L. Molloy			<u> </u>
	325 S. Boulevard	P.O. Box NOT acco		M 9:
	Tampa, FL 33606	P.O. Box NOT acci	ptable	39
The street address changed will	ess of its registered office be identical.	and the street add	ress of the business office	of its registered agent,
Such change was authorized by the	as authorized by resolution he board, or the corporation	n duly adopted by on has been notifie	its board of directors or bed in writing of the change	y an officer so
Signatu	re of an office, or director		Jason Sta	arling
I hereby accept I further agree of my duties, ar document is bel corporation has	the appointment as regist to comply with the provisi ad I am familiar with and a ing filed merely to reflect a s been notified in writing o	ered agent and agens of all statutes accept the obligate a change in the refer this change.	ree to act in this capacity relative to the proper and ion of my position as regi, gistered office address, I i	l complete performance stered agent. Or, if this hereby confirm that the
12			12/22/10	
	nature of Registered Agent		Date	
If signing on be	chalf of an entity:			
<u></u>	yped or Printed Name			
1	Jean or Linned Hame			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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