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COVER LETTER:

10:	Amendment Section Division of Corporations				
SHRI	Signature Communities, Inc.				
SOBO	Name of Corporation				
	J61943				
DOC	UMENT NUMBER:				
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please	return all correspondence concerning this matter to the following:				
	Stephen Crawford				
	Name of Contact Person				
	Crawford & Crawford, Chartered				
Firm/Company					
	3755 Liberty Square				
Address Fort Myers, FL 33908 City/State and Zip Code					
					crawlaw@aol.com
					E-mail address: (to be used for future annual report notification)
Б. С					
	rther information concerning this matter, please call:				
Step	hen Crawford 239 822-7038 at ()				
	Name of Contact Person Area Code & Daytime Telephone Number				
Enclo	sed is a \$35.00 check made payable to the Department of State.				
	Mailing Address: Amendment Section Street Address: Amendment Section				
	Division of Corporations Division of Corporations				
	P.O. Box 6327 Clifton Building				
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				

•	BOTH FOR	CORPORATIONS
statement of cho	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.
1 The name of	the corporation:	munities, Inc.
		, Naples, FL 34108
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: 08/31/198	J61943 Document number:
	d street address of the current regist rtment of State: (If resigned, enter r Richard F. Corace	tered agent and registered office on file with the resigned)
	11125 Gulf Shore Drive	
	Naples, FL 34108	
6. The name and (if changed):	d street address of the new registers Gerald F. Griffin, II	ed agent (if changed) and /or registered office
	525 Via Veneto	ox NOT acceptable
	P.O.B Naples, FL 34108	ox NOT acceptable
The street addr	ess of its registered office and the l be identical.	street address of the business office of its registered agent,
Such change wanthorized by the	as authorized by resolution duly ache board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.
		Gerald F. Griffin, II, President
•	are of an officer or director	Printed or typed name and title
I further agree performance of agent. Or. if th	to comply with the provisions of a fmy duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I ified in writing of this change.
	94/	06/01/2015
Sig	mattire of Registered Agent	Date
	ehalf of an entity:	
7	Typed or Printed Name	

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