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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE. FLORINA

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COVER LETTER

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Registration Section

Division of Corporations SUBJECT: Change of Company Address (Name of Limited Liability Company) Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Alice Austin (Name of Person) Quality Affordable Homes, LLC (Firm/Company) 1414 S Chatsworth Pt (Address) Lecanto, FL 34461 (City/State and Zip Code) For further information concerning this matter, please call: Alice Austin) 270-8764 at ((Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations **Division of Corporations Clifton Building** P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: **✓** \$25 Filing Fee \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.50 company submits the following statement in order to chain the State of Florida.	8, Florida Statutes, the undersigned limited liability nge its registered office or registered agent, or both,
1. Name of the limited liability company: Quality Affo	rdable Homes, LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 1414 S Chatsworth Pt Lecanto, FL 34461
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1414 S Chatsworth Pt Lecanto, FL 34461
June 18, 2004	L04000046194
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Thomas Austin
Registered Office Address:	2058 Viewpoint Landings Res
	Lakeland, FL 33810-3298
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	\simeq 4.5
NEW Registered Agent:	D M 9
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1414 S Chatsworth Pt Lecanto,FL 34461
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company. **Company of a member of authorized representative of a member of a m	et address of the registered office and the business ase of a Florida limited liability company, it is by an affirmative vote of the members of the limited
Alice Austin (Printed or typed name of signee)	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited fiability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.
(\$ignature of Registered Agent) Division of Corporations P.O. Box	

FILING FEE: \$25.00

INHS18 (05/08)