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FEB 1 8 2010

EXAMINER



ACCOUNT NO. : I2000000195 REFERENCE: 287631 7468825 AUTHORIZATION : C COST LIMIT ORDER DATE: February 17, 2010 ORDER TIME : 9:23 AM ORDER NO. : 287631-075 CUSTOMER NO: 7468825 CHANGE OF AGENT RELIANCE HOUSING SERVICES NAME: FLORIDA, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XXX PLAIN STAMPED COPY CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER:

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. 1	Name of the limited liability company:	RELIANCE H	IOUSING SERVICES FLORIDA, LLC	
2. (a) Principal office address of limited I (Note: MUST BE STREET ADD	ability company: RESS)	20 Battery Park Avenue, Suite 305 Asheville, NC 28801	
(b) Mailing address of limited liability (Note: MAY BE POST OFFICE	company: BOX)	20 Battery Park Avenue, Suite 305 Asheville, NC 28801	
04	/26/2005		L05000040620	
3. I	Date of filing/registration in Florida	4.	Document number	
5.	5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	Registered Agent:		Robert O. Jackson	
Registered Office Address:	<u> </u>	305 E. Broward Boulevard		
		<u>,</u>	Sutie 200 Ft. Lauderdale, FL 33301	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	NEW Registered Agent:	<u>(</u>	Corporation Service Company	
	NEW Registered Office Address:		1201 Hays Street	
(MUST BE FLORIDA STREET ADDRESS)		<u>IDDKESS)</u> -	Fallahassee ,FL 32301	
that offi here liab lim	after the change or changes are made,	the Florida street a cal. Or, in the cas were authorized by in the articles of a	ws of the State of Florida, it is hereby confirmed address of the registered office and the business e of a Florida limited liability company, it is an affirmative vote of the members of the limited organization or the operating agreement of the	
Bla (Pri	anca Lozada, Authorized Person nted or typed name of signee)			
$\boldsymbol{\nu}$	ereby accept the appointment as registed uply with the provisions of all statutes refamiliar with and accept the obligation. Or, if this document is being filed to firm that the limited liability company Corporation Service Company Corporation Service Company Constant of Registered Agent) Grace E. Kirby	/ - 1	ree to act in this capacity. I further agree to er and complete performance of my duties, and I s registered agent as provided for in Chapter 608, ange in the registered office address, I hereby in writing of this change.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00