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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: NexGeneration Homes LLC (Name of L		ity Company)		•
Dear Sir or Madam:				
The enclosed Registered Agent/Registered O	ffice Change	and fee(s) are submitted fo	r filing.	
Please return all correspondence concerning t	this matter to	the following:		
NA/- d- NA/				
Wade Warr (Name of Person)		_		
,				
NexGeneration Homes LLC		_		
(Firm/Company)				
1119 Turner St				
(Address)		-		
			2007 NOV 21 SECRETARY	
Clearwater, FL 33756		_	CRE NO	A. 221/10
(City/State and Zip Code)			TAR	112000
F. C. al	111	_		1
For further information concerning this matte	r, please can	•	HII: FLO	-
Wade Warr	at (727	, 230-4911	AH II: 10 OF STATE EE, FLORID!	
(Name of Person)		(Area Code & Daytime Tel		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Div P.O	isitration Section ision of Corporations Box 6327 lahassee, Florida 32314		
Enclosed is a check for the following	g amount:			
✓ \$25 Filing Fee	□ \$5	5 Filing Fee & Certified Co	ору	

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. The name of the limited liability company is: NexGeneration Homes LLC 2. The mailing address of the limited liability company is: 1119 Turner St. Clearwater,Fl 33756 May 10, 2007 L07000050385 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Wade Warr Name 429 1st Ave NE Address Largo, FI 33770 City, State and Zip 6. The name and address of the new registered agent and/or office: Wade Warr Name 1119 Turner St Florida street address (P.O. Box NOT acceptable) Clearwater 33756 City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member of altiborized representative of a member) Wade Warr (Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agents)

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