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SECRETARY OF STATE
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J. BRYAN
APR 2 8 2009
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 608.50 company submits the following statement in order to char in the State of Florida.	8, Florida Statutes, the undersigned limited liability age its registered office or registered agent, or both,
1. Name of the limited liability company:	mart Homes LLC
<ul> <li>(a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)</li> <li>(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)</li> </ul>	Sanford, Fl. 32771 SAA
3/3/08 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 States
Registered Agent:	lerry avale
Registered Office Address:	5antood F1. 32771
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NE</b>	W Registered Office address:
NEW Registered Agent:	forothy Adala
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Santore FLSZ771
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the charge confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles climited liability company.	et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
Signature of a member or authorized representative of a member)	<del>_</del>
(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 pram 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 liability company has been notified.	agree 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 d in writing of this change.
Signature of Registered Agent)	

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

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