

L1000007256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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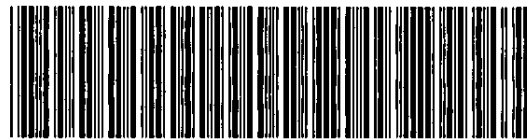
(Business Entity Name)

(Document Number)

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SECURITY STATE
TALLAHASSEE, FL 32304

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. Name of the limited liability company: MAURO HOMES LLC

2. (a) Principal office address of limited liability company: 8, PAISLEY LANE
(Note: **MUST BE STREET ADDRESS**) STOUFFVILLE, ONTARIO
L4A 7X4 CANADA

(b) Mailing address of limited liability company: P.O. Box 370
(Note: **MAY BE POST OFFICE BOX**) STOUFFVILLE, ONTARIO
L4A 7Z6 CANADA

03/24/2010
3. Date of filing/registration in Florida

L10000032506
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: DIGIOVANNI, GUS

Registered Office Address: 2245 N. McMULLEN BOOTH ROAD,
CLEARWATER, FL 33759

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: SIMON B. HOWEN

NEW Registered Office Address: HARDING & ASSOCIATES TAX SERVICES INC.
(**MUST BE FLORIDA STREET ADDRESS**) 113 PONTIAC PLAZA,
AMBUENDALE, FL 33823-3439

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 or authorized representative of a member

Printed or typed name of signee

FRANK MAURO (MANAGER)

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 Agent

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