N000005073

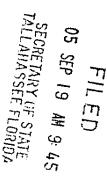
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COVER LETTER

TO: Ámendment Section Division of Corporations					
SUBJECT: HOPE HORSES HELPING PEOPLE, INC. (Name of corporation)					
DOCUMENT NUMBER: N00000005073					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Cathi Brown (Name of contact person)					
HOPE HORSE HELPING PEOPLE, INC. (Firm/Company)					
5333 SW 75th Street, L-71 (Address)					
Gainesville, FL 32608					
(City/state and zip code)					
For further information concerning this matter, please call:					
Cathì Brown (Name of contact person) at (386) 365-2788 (Area code & daytime telephone number)					
Enclosed is a \$35.00 check made payable to the Department of State.					
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	-	617.0502, 607.1508, or 617.1508, Florida Si n organized under the laws of the State of $\overline{{\sf F}}$		ís 	
in orde	er to change its registered office o	r registered agent, or both, in the State of Flo	orida.		
1. The name of	the corporation: HOPE HORSES	HELPING PEOPLE, INC.			
	office address: 9722 SW 153rd				
3. The mailing	address (if different): 5333 SW 75	6th Street, L-71, Gainesville, FL 32608			
4. Date of incor	poration/qualification: July 31, 20	Document number: N0000000)5073		
	d street address of the current regi- rtment of State:	stered agent and registered office on file with	ı the		
	Carol Huegel				
	11326 SW 21st Lane				
	Gainesville, FL 32607				
6. The name and (if changed):	d street address of the new register	red agent (if changed) and /or registered offic	SECRE TALLAH	05 SE	
	Carol Huegel		TAR	-0	=
	5333 SW 75th Street, L-71		133 30 A	9 1	
	(P.O. Box NOT	acceptable)	ST/	بع)
	Gainesville, FL 32608			#5	
The street addras changed will	ess of its registered office and the	e street address of the business office of its	registere	- "	nt,
Such change w authorized by t	as authorized by resolution duly he board or the corporation has	adopted by its board of directors or by an obeen notified in writing of the change.	officer so		
(Signal	DE Cauco	Cathi N Brown, Treasusrer	le)		_
, -	•	gent and agree to act in this capacity, all statutes relative to the proper and com the obligation of my position as registered ge in the registered office address, I hereby change.	•	orma or, if i that i	nce this the
Chille	LOV HUODO	9-13-05			
(Si	gnature of Registered Agent	(Date)			_
If signing on be	chalf of an entity:				
	Typed or Printed Name)	_			

* * * FILING FEE: \$35.00 * * *