N03000000185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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8-4

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida *in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Extended Hands ~~Inc~~ Community Development Corporation formerly Shammah Inc
2. The principal office address: 1100 NW 4 Street Ft. Lauderdale, FL 33311
3. The mailing address (if different): same
4. Date of incorporation/qualification: 1/6/03 Document number N03000000185
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Phyllis Jones
2830 NW 15 Street OR 7684 Nob Hill Road PMB #104
Ft. Lauderdale FL 33311 Tamarac FL 33321

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Torrey Phillips
1100 NW 4 Street
(P.O. Box NOT acceptable)
Ft. Lauderdale, FL 33311

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

* Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Torrey Phillips (Signature of an officer or director) — Torrey Phillips, President (Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Torrey Phillips (Signature of Registered Agent) — 8/1/05 (Date)

If signing on behalf of an entity:

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314