

Florida Department of State

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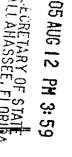
From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (305)672-0686

Fax Number

: (305)672-9110



REGISTERED AGENT CHANGE

HQM RESTORE HOPE FOUNDATION, INC.

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

Pursuant to the provisions of section 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 is: HOM 1	Restore Hope Fo	undation, Inc.		
2. The principa	I office address: 2979 PG	A BLVD			
	CH GARDENS FL 3341				
		<u> </u>			
3. The mailing	address (if different):				
					
4. Date of incom	rporation/qualification:	8/19/2004	Document Number:	N04000008	323
	d street address of the curr utment of State: ADAMS, SANDRA	ent registered ag	ent and registered office of	ÉÉ (3
	2979 PGA BLVD.			<u> </u>	्रे ज
	PALM BEACH GARDENS	FL 33410		_ AA -	
6. The name an (if changed):	d street address of the new	registered agen	(if changed) and /or regi	DECLOCK PROTOC	E W
_ ,	Corporate Creations Net	work Inc.		• •	-
	11380 Prosperity Fanns	Road #221E			
		Box Not acceptable)			л 0
	Palm Beach Gardens FI				
agent, as chang	ress of its registered officed will be identical.				
Such change wanthorized by the	as authorized by resolution board, or the corporation	on duly adopted n has been notifi	I by its board of director ed in writing of the chang	rs or by an o e.	fficer so
Amela	e dama	,	Angela E. Howard, Assistant S (Printed or Typed nat	ecretary	
(Signa	ture of an officer or director)	·	(Printed or Typed na	me and title)	
I further agree performance of agent. Or, if ti	the appointment as register to comply with the professor duties, and I am familiated fits document is being filed that the corporation has be	visions of all s iar with and acc i merely to refle	tatutes relative to the p ept the obligation of my po ct a change in the registe riting of this change.	roper and co osition as reg red office add	istered
Angela E. Haward August 12, 2005					
	ture of Registered Agent)		(Date)	,	
If signing on be Angela	half of an entity: Howard, Asst. Secretary	ı			
(Тур	ed or Printed Name)		**	•	

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

Corporate Creations International Inc. 941 Fourth Street Miami Beach FL 33139 (561) 694-8107