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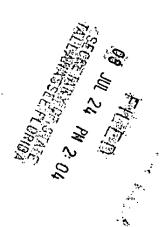
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COVER LETTER

Division of Corporations				
SUBJECT: A&A Housing, Inc.	(Name of Corporation	n)		
DOCUMENT NUMBER: N49370				
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:				
Roger C. Lambe	ert, (Name of Contact Per	son)		
(Firm/Company)				
4304 SW 86th Way (Address)				
Gainesville, FL 3	2608 (City/State and Zip Co			
For further information concerning this matter, please call:				
rot farmer information concerning in	is matter, please can.			
Roger C. Lambert, P.A. (Name of Contact Per	$\frac{1}{(A)}$ at ($\frac{3}{(A)}$	52) 494-9957 rea Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Add Amendment Division of P.O. Box 63 Tallahassee	Corporations 327	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

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

statement of cha	provisions of sections 607.0302, 617.0302 inge is submitted for a corporation organi r to change its registered office or registe.	zed under the laws of the State of Florid	la		
	the corporation: A&A Housing, Inc.	rea agent, or both, in the blace of 1 tortue	4.		
	office address: 4304 SW 86th Way, Gain	esville FL 32608			
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 6/15/92	Document number: N49370			
	I street address of the current registered agreement of State:	ent and registered office on file with the			
	Roger C. Lambert, 1818 Australi	an Ave. South #406			
	West Palm Beach, FL 33409	,			
		•	Ž IŽ		
6. The name and (if changed):	I street address of the new registered agent	t (if changed) and /or registered office			
	Roger C. Lambert,	E. C.	2 高		
	4304 SW 86th Way, Gainesville FL 32608				
	(P.O. Box NOT acceptable)		% O4		
The street addre	ess of its registered office and the street a be identical.	address of the business office of its regi	stered agent,		
Such change was authorized by the	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an office ified in writing of the change.	er so		
- Kill Cignatu	ure of an officer or director)	Roger C. Lambert, (Printed or typed name and title)			
I hereby accept I further agree to of my duties, an document is bei	the appointment as registered agent and to comply with the provisions of all state of I am familiar with and accept the obling filed merely to reflect a change in the been notified in writing of this change.	l agree to act in this capacity tes relative to the proper and complete gation of my position as registered age registered office address, I hereby cor	performance nt. Or, if this nfirm that the		
En C	Land	7/22/08			
(Sig	nature of Registered Agent)	(Date)	· · · · · · · · · · · · · · · · · · ·		
If signing on be	half of an entity:				
(7)	yped or Printed Name)				

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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