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SECRETARY OF STATE

ALLANASSEE, FLORIDA

Chg.

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

Pursuant to the provisions of sections 607.0502, 617.0502 the undersigned corporation organized under the laws of the	· · · · · · · · · · · · · · · · · · ·
submits the following statement in order to change its regis	
the State of Florida.  1. The name of the corporation: Shelter From to Corporation	the Storm Affordable Housing
2. The mailing address of the corporation : P.O. Box	5706, Ocala, FL 34478
3. Date of incorporation/qualification: 12/30/92	
4. The name and address of the current registered agent and	office:
	<del></del>
· · · · · · · · · · · · · · · · · · ·	
5. The name and address of the new registered agent (if char (P. O. Box Not Accept	
Capital Connection, Inc.	
417 E. Virginia Street,	Suite 1
Tallahassee, Florida 323	Suite 1 SSEE C
The street address of its registered office and the street add agent, as changed, will be identical.	bress of the business office of its registered
Such change was authorized by resolution duly adopted by authorized by the board.	
C. Sel-44	05/07/07
(Signature of an officer, chairman or vice chairman of the board)	(Date)
By: C. Schmidt, as President.	
(Printed or typed name and title)  Having been named as registered agent and to accept serve corporation, I hereby accept the appointment as registered further agree to comply with the provisions of all statutes performance of my duties, and I am familiar with and accepted agent	rice of process for the above stated I agent and agree to act in this capacity. I relative to the proper and complete opt the obligation of my position as
XII Vani White	5/14/07
(Signature of Registered Agent)	(Data)
If signing on behalf of an entity:	
CAPITAL CONNECTION, INC. (Typed or Printed Name)	(Capacity)
* * * FILING FEE: S35	5.00 * * *
CR2B043(9:00)  Division of Corporations P.O. Box 6327	Tallahassee, FL 32314