## 19900005399

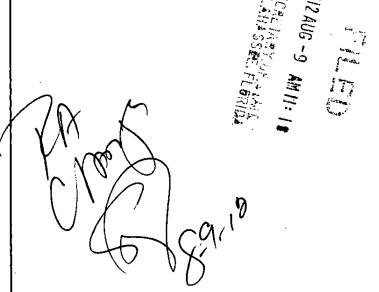
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL .
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



700237658977

DEPARTMENT OF STATE





ACCOUNT NO. : 12000000195

REFERENCE

AUTHORIZATION

COST LIMIT

ORDER DATE : August 1, 2012

ORDER TIME : 9:33 AM

ORDER NO. : 296890-167

CUSTOMER NO: 7427498

## CHANGE OF AGENT

NAME:

TCB FLORIDA AFFORDABLE

HOUSING, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	
	he corporation: TCB FLORIDA AFFORDABLE HOUSING, INC.	
2. The principal	office address: c/o The Community Builders, Inc.	
	ey Street, Suite 500, Boston, MA 02116	
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification: 09/10/1999 Document number: N9900005399	
	street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
	C T Corporation System	
1200 South Pine Island Road		
	Plantation, FL 33324	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office	
	Corporation Service Company  1201 Havs Street	
	P.O. Box NOT acceptable	
	P.O. Box NOT acceptable  Tallahassee, FL 32301	
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.	
- KA	Maureen Cathell, Vice President Printed or typed name and title	
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.	
By: Sign	August 7, 2012  Date	
U	half of an entity:	
	by, Assistant Vice President	

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

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