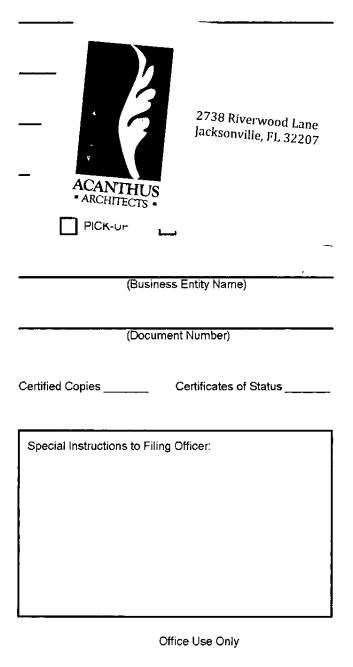
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SECTION OF STA

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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, statement of change is submitted for a corporation organized under the in order to change its registered office or registered agent, or	ne laws of the State of Florida
1. The name of the corporation: Acanthus Architects, Inc.	
2. The principal office address: 2738 Riverwood Lane, Jackso	nville, Florida, 32207
3. The mailing address (if different):	**
4. Date of incorporation/qualification: 10/09/2000 Docum	nent number: P00000094992
5. The name and street address of the current registered agent and registered Department of State: (If resigned, enter resigned)	Sati of E
Stephen G. Prom, Esq.	
50 N. Laura St., Suite 2500	9: 50 ATE
Jacksonville, FL 32202	—————————————————————————————————————
6. The name and street address of the new registered agent (if changed (if changed): KAREN H. RUTTER) and /or registered office
2738 RIVERWOOD LANE P.O. Box NOT acceptable	
JACKSONVILLE, FL 32207	1.
The street address of its registered office and the street address of the as changed will be identical.	ne business office of its registered agent,
Such change was authorized by resolution duly adopted by its board authorized by the board, or the corporation has been notified in writ	of directors or by an officer so ling of the change.
Kare Signature of an officer of director KARE	NH. RUTTER PRESIDENT
I hereby accept the appointment as registered agent and agree to ac I further agree to comply with the provisions of all statutes relative of my duties, and I am familiar with and accept the obligation of my document is being filed merely to reflect a change in the registered corporation has been notified in writing of this change.	ct in this capacity. to the proper and complete performance position as registered agent. Or, if this office address, I hereby confirm that the
Karen J Rutte JU Signature of Registered Agent	14 1 2011
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 CR2E045 (8/05)