PODE	75/9	
Fairfield Communitie Attni Anna L. Walton 8669 Commodity Circle Suite 200	er sind	e Use Only
cor Orlando FL 32819	UMBER(S), (if know	vn):
1(Corporation Name) 2(Corporation Name) 3(Corporation Name)	(Document #) (Document #)	99 FEB II PH I: 57 SEUNETANY OF STAT
4(Corporation Name)	(Document #)	Om T
Walk in Pick up time Mail out Will wait NEW FILINGS Profit Not for Profit	Photocopy AMENDMENTS Amendment Resignation of R.A., C Change of Registered	
☐ Limited Liability ☐ Domestication ☐ Other	Dissolution/Withdraw	
OTHER FILINGS	REGISTRATION/QUAL	IFICATION
☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	· · · · · · · · · · · · · · · · · · ·
CR2E031(7/97)]	Examiner's Initials

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, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Arkansas submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the corporation is:___ 2. The mailing address of the corporation is: Confirming Fair Livid Communifies 3. Date of incorporation/qualification: _ 12-13-83 Document number: 4. The name and address of the current registered agent and office: 1200 South Pine Island Road 5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable) Orlando, FL 32819 The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical. Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board. (Signature of an officer, chairman or vice chairman of the board) (Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. If signing on behalf of an entity:

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

CR2E045(7/97)

(Typed or Printed Name)

(Capacity)