

P02000113500

Florida Department of State
Division of Corporations
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Account Name : C T CORPORATION SYSTEM
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Email Address:

Sjohnstone@vrei.net

**REGISTERED AGENT CHANGE
CEDAR HILLS CAPITAL MANAGEMENT, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

RA Change

D. CORRELL DEC 07 2009



December 7, 2009

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: CEDAR HILLS CAPITAL MANAGEMENT, INC.
REF: W09000052963

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Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H09000251888
Letter Number: 809A00037253

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1308, or 617.1308, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Cedar Hills Capital Management, Inc.
2. The principal office address: 240 Brookstone Centre Parkway Columbus, Georgia 31904
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/22/2002 Document number: P02000113500
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Capital Connection, Inc.

417 E. Virginia St. Suite 1

Tallahassee, FL 32301-1283

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

M. Ronald Culbreth
Printed or typed name and title

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By: [Signature]
Signature of Registered Agent

Ternell Kearney Asst. Secretary
Date: 12/13/09

If signing on behalf of an entity:

Ternell Kearney
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

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