## P03000117819

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## **COVER LETTER**

TO: Amendment Section Division of Corporations						
SUBJECT: SHELBY HOMES AT MILLSTONE, INC.  Name of Corporation						
DOCUMENT NUMBER: P03000117819						
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
JACK SHORT						
Name of Contact Person						
RLS GROUPS, INC.						
Firm/Company						
19954 N.E. OOTALANGNUE CLUTE OOF						
18851 N.E. 29TH AVENUE, SUITE 905 Address						
AVENTURA, FL 33180						
City/State and Zip Code						
ICHODI GODOUDO COM						
JSHORT@RLSGROUPS.COM  E-mail address: (to be used for future annual report notification)						
:						
For further information concerning this matter, please call:						
JACK SHORT at ( 954 ) 318-1000						
Name of Contact Person at (954) 318-1000  Area Code & Daytime Telephone Number						
Enclosed is a \$35.00 check made payable to the Department of State.						
Mailing Address: Amendment Section  Division of Corporations  P.O. Box 6327  Street Address: Amendment Section  Division of Corporations  Clifton Building						

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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

-	-		07.1508, or 617.1508, Flo l under the laws of the Stat	
in order	r to change its registerea	office or registerea	agent, or both, in the Stat	e of Florida.
1. The name of t	he corporation: Shelb	y Homes at M	illstone, Inc.	
2. The principal	office address: 18851	N.E. 29th Avenu	e, Suite 905 Aventur	a, FL 33180
			····	
3. The mailing a	ddress (if different): Sa	me	······································	
4. Date of incorp	oration/qualification:	10/22/2003	Document number:	P03000117819
	street address of the curtiment of State: (If resign		and registered office on f	ile with the NOV
	Robert Shelley			- ASSE
	2750 Miami Gardei	ns Dr 2nd FL		
	Aventura, FL 33180	o us		Se Se
6. The name and (if changed):	street address of the new	v registered agent (if	changed) and /or register	ed office
	Robert Shelley (No	Change)	<del> </del>	<del></del>
	18851 N.E. 29th Av			
	A	P.O Box NOT acc	eptable	
	Aventura, FL 33180			<del></del>
The street address as changed will	ss of its registered office be identical.	e and the street add	ress of the business office	e of its registered agent,
Such change wa authorized by th	s authorized by resolutie e board, or the corporat	on duly adopted by ion has been notified	its board of directors or d in writing of the chang	by an officer so e.
algnature	of an officer or director		Jack Sho	
Thereby accept if further agree to of my duties, and document is beir corporation has	e the appointment as regi o comply with the provi, I I am familiar with and ng filed merely to reflect been notified in writing	stered agent and ag sions of all statutes l'accept the obligat l'a change in the re of this change.	gree to act in this capacit relative to the proper an ion of my position as reg gistered office address, I	y, d complete performance istered agent. Or, if this hereby confirm that the
			4///	'/
If signing on bel	addre of Registered Agent		Date	
	•			
	Robert Shelley ped or Printed Name			

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