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(Requestor's Name) (Address) (Address)	700060662557
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	10/17/05(at(vi0002 **:5.00
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COVER LETTER

TO: Amendment Section Division of Corporations

Hunt Real Estate, Inc. (Name of Corporation) SUBJECT:

DOCUMENT NUMBER: <u>P0500009968</u>/

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:

(Name of Contact Person) Hunt Real Estate, Inc. 1250 SE Port SAINT Lucie Blud suite B (Address) Port SAINT Lucie, FL 34952 (City/State and Zip Code) FILED Port Saint Lucie, FL 34952 (City/State and Zip Code) r information concerning this matter, please call: DEBORAH Hunt (Name of Contact Person) at (772), 486-3706 (Area Code & Daytime Telephone Number) For further information concerning this matter, please call:

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section **Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

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, this statement of change is submitted for a corporation organized under the laws of the State of <u>Florida</u> in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: <u>Hund Real Estate</u>, <u>Inc</u>: 2. The principal office address: <u>1250 SE Poet Saint Lucie Blud</u>: <u>suite B</u> <u>Poet Saint Lucie</u>, <u>FL</u> <u>34952</u> 3. The mailing address (if different): <u>209 SW DELEON</u> <u>Sprinces</u> <u>Dr</u>: <u>Poet Saint Lucie</u>, <u>FL</u> <u>34986</u> 4. Date of incorporation/qualification: <u>7-14-2005</u> Document number: <u>Po50000 99681</u>
- 4. Date of incorporation/qualification: <u>7-14-2005</u> Document number: <u>P050000 9468</u>
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

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

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 of an officer or director)

EBORAH. (Printed or typed name and litle)

DCI 17 ME TI 100

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.

(Signature of Registered Agent)

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)