## P06000095147

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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO: Amendmer Division of	nt Section Corporations		,	
SUBJECT: Sut	ton Family Hom	esandManage Name of Corpora	mentConsu	ulting,Inc.
DOCUMENT NU	MBER:	P060000	95147	: 
The enclosed States	nent of Change of Re	gistered Office/Agen	it and fee are su	bmitted for filing.
Please return all con	rrespondence concern	ing this matter to the	following:	
		:.	•	
		Kara Sutton		
		Name of Contact P	erson	
	Sutton Family H	omes and Manag	iomont Conci	ulting Inc
	Outton Family 11	Firm/Company	/	aiting, mc
				:
		PO Box 1198	8	
·		Address	·	;
		-Nowborn-El-21	0660	
		Newberry, FL 32 City/State and Zip	Code Code	······································
•	kara	@suttonfamilyhor	mes com	· •
<del>-</del>	E-mail address: (to	be used for future a	innual report n	notification)
				1
For further informa	tion concerning this m	atter, please call:		
	Kara Sutton		352	<sup>†</sup> 318-9864
Nair	ne of Contact Person	at (_	Area Code & D	aytime Telephone Number
Englosed is a \$35.0	O abaak mada nayabla	to the Donartment o	of Ctata	
Eliciosed is a \$35.0	0 check made payable	to the Department o	n State.	•
	Mailing Address		Street Addr	-peg*
ر المنظم المسلم المسلمان المسلم	- Amendment Sec	ction -	Amendmen	nt Section
	Division of Cor	porations		f Corporations
•	P.O. Box 6327	20214	Clifton Bui	_
	Tallahassee, FL	32314 .		utive Center Circle e, 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 Status statement of change is submitted for a corporation organized under the laws of the State of Flor	rida
in order to change its registered office or registered agent, or both, in the State of Florid	da.
1. The name of the corporation: Sutton Family Homes and Management Cor	sulting, Inc.
2. The principal office address: 320 NE Santa Fe Blvd., High Springs, FL 32643	····
	**
3. The mailing address (if different): PO Box 1198, Newberry, FL 32669	
4. Date of incorporation/qualification: 7/17/2006 Document number: P060	000095147
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)	e Āg <b>t</b>
Kara Sutton	
25159 NW 10th Avenue	N 22
Newberry, FL 32669	22 AH
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	AM II: 46 RP STATE EMPLORIDA
Kara Sutton	•
320 NE Santa Fe Blvd	
P.O. Box NOT acceptable	
High Springs, FL 32643	
The street address of its registered office and the street address of the business office of its reas changed will be identical.	gistered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an off authorized by the board or the corporation has been notified in writing of the change.	
Signature of an officer or director  Kara.Sutton, Preside 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 comple of my duties, and I am familiar with and accept the obligation of my position as registered accument is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change.	ete performance gent. Or, if this confirm that the
Signuture of Registered Agent Date	•
If signing on behalf of an entity:	
Typed or Printed Name  *** FILING FEE: \$35.00 ***	a state a second

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE: 12.

MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327; TALLAHASSEE, FL 32314 CR2E045:(8/05)min come to the common that the common to the common the common that the common the common that the common that

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