Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000136109 4)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Pax Number : (850)205 -0380

Account Name : JOHN K. MCCLURE, P.A.

Account Number : 120000000201 Phone (863)402 -1888

Fax Number : (863)402 -2436

REGISTERED AGENT CHANGE

HISTORIC HARDER HALL, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$35.00 |

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

| | e provisions of sections (d corporation organized t | | 607.1508, or 617.1508, Florida State of Thems to | Statutes, |
|---|--|--|--|---------------------------------|
| ~ | | | ered office or registered agent, o | r both, in |
| the State of Flo | | Ů - | - | |
| 1. The name of | f the corporation: HIS | TORIC HARDER HAL | TNC. | |
| | | a | | |
| 2. The mailing | address of the corporation | n: <u>4875 Sanctu</u> | ary Lane, Boca Raton, Flor | <u>ída 33431</u> |
| 3. Date of inco | orporation/qualification: | 6/6/1994 | _ Document number: _ p940000/ | 41914 |
| 4. The name ar | nd address of the current re | egistered agent and o | ffice: | |
| | Eugene A. Conti | | | |
| | lll N 'M' Stree | <u> </u> | | |
| | Lake Worth, Flor | rida 33460 | Z s | 0 |
| 5. The name ar | nd address of the new regi: | stered agent (if chang | ed) and/or registered office (if ch | anged): |
| | • | O. Box Not Accept | 54 | |
| | John K. McClure | | | ا ف |
| | 230 South Comme | rce Avenue | —————————————————————————————————————— | 로 : |
| | | la 33870 | ويق يملمه | \(\frac{1}{2}\) \(\frac{1}{2}\) |
| agent, as chang | ged, will be identical. | | ess of the business office of | |
| Such change wanthorized by | vas authorized by resolution | on duly adopted by i | ts board of directors or by an off | icer so |
| - | Jiao Jinor | | 05.08.0 | <u> 2C</u> |
| (Signature | of an officer, chairman or vice cl | hairman of the board) | (Datc) | |
| Line Lim | or, President | | ·· | |
| Hening hoon v | (Printed or typed name and | | e of process for the above states | 1 |
| corporation, I I further agree performance of | hereby accept the appoint to comply with the proving my duties, and I am fam | itment as registered i sions of all statutes i siliar with and accep | te of process for the above stated agent and agree to act in this ca relative to the proper and compl t the obligation of my position a | pacity. ete s |
| registered age | "I Malling | / | 5-08-02 | |
| | Signature of Registered Agent) | | (Date) | |
| If signing on beh | J K MCCLURI | ٤ | (Canadita) | |
| | (Typed or Printed Name) | | (Capacity) | |
| * * * FILING FEE: \$35.00 * * * | | | | |
| CR2E045(9/00) | Division of Corporations | P.O. Box 6327 | Tallahassee, FL 32314 | |