Jeffrey & Lois J. Prater 2020 84th St. Cir. NW Bradenton, FL. 34209-9452

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	
(Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
(**************************************	5000038312257
3.	-U3/12/U1U1119U29 *****35.00 *****35.00
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☐ Walk in ☐ Pick up time	Certified Copy
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NEW FILINGS Profit Not for Profit	AMENDMENTS Amendment Resignation of R.A., Officer/Director 10
Limited Liability	Resignation of R.A., Officer/Director
Domestication	Dissolution/Withdrawal
☐ Other	☐ Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other

CR2E031(7/97)

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

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

Pursuant to the provisions of the undersigned corporable submits the following state of Florida.	sections 607.0502, 6 lation organized u lement in order to c	17.0502, 607.1508, or 6 nder the laws of the hange its ragistered offic	17.1508, Florida Statutes State of FLORIDA se or registered agent, o
1a. The name of the corpor	ation is:sun co	AST HOUSING, INC.	
1b. The mailing address of P.O. Box 14416	the corporation is: Bradenton, FL 342	80	
1c. Date of incorporation:_	January 2, 1997	Document number:	P9700000113
2. The name and address	of the current regists	ered agent and office:	Not Acceptable
	Corporate Access, Inc.		28 3
• *** =	236 East 6th Avenue		
•	Tallahassee, Flor	ida 32303	2 1
The street address of its registered agent, as change	2020 84th Street Bradenton, Florid	a 34209	7
Such change was authorize so authorized by the board.	d by resolution duly a	idopted by its board of d	frectors or by an officer
(Signature of an officer, che with the beautiful of the b	iman or ard) 94		(-/9-0) Date)
(Printed or typed name an Having been named as reg corporation, I hereby accept further agree to comply we performance of my duties, registered agent.	d title) Istered agent and to the appointmentas i vith the provisions of and I am familiar w	accept service of proce registered agentand agre fall statutes relative to t ith and accept the oblig	ess for the above stated se to actin this capacity. he proper and complete lation of my position as
(Signature of Registered A If signing on behalf of an ent	_		2-/9-0/ Date)
(Typed or Printed Name)		(Ca	pacity)

Division of Corporations, P.O. Box 6327, Tallahassee