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## FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

November 14, 1997

HAFT-GREEN 11440 OKEECHOBEE BLVD., #217 ROYAL PALM BEACH, FL 33411

SUBJECT: HAFT-GREEN DEVELOPMENT CORP.

Ref. Number: P97000083243

We have received your document for HAFT-GREEN DEVELOPMENT CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6916.

Letter Number: 397A00054867

Carol Mustain Corporate Specialist

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

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

undersigned corp	provisions of sections 607.0 poration organized under the owing statement in order to 6 1.	e laws of the State of ${f F}$	lorida	
1. The name of	the corporation is:Haft-	Green Developmen	t Corp.	<del></del>
2. The mailing a	address of the corporation is	: 11440 Okeechobe		
	poration/qualification: Sept 1 address of the current regis	25; 1997 <b>Doc</b>		00083243
	Karen B. Rozar	: .		
	1201 Hays Stre	et		
	Tallahassee, F	1. 32301	<del></del>	.s 97
5. The name and	l address of the new registere	· ·	). Box Not Acceptable)	ALL 10EC -9 SECRETARY
		obee Bl., Ste #2		is B ac
		Beach, Fl. 33411	17	
	ess of its registered office and ed, will be identical.			
lo	s authorized by resolution du board.	_	11/25/57	ncer so
	icer, chairman or vice chairman of t	•	(Date)	
Rober	t M. Haft, Presiden (Prin	nted or typed name and title)		• <del>••••</del>
Having been na I hereby accept comply with the and I am familid	med as registered agent and the appointment as registere provisions of all statutes rel ar with and accept the obliga	to accept service of pro ed agent and agree to act lative to the proper and c ation of my position as re	cess for the above state t in this capacity. I fur complete performance ( egistered agent.	ed corporation, ther agree to of my duties,
(Signature	of Registered Agent)		11/25/97 (Date)	
If signing on be	half of an entity:			
Robert M. (Typed or	Haft Printed Name)	Presi	ident (Capacity)	
CR2E045(1/95)		FILING FEE: \$35.00		