P98000003146

STEPHEN P. SAPIENZA

300 N. STATE STREET

P.O. BOX 635

BUNNELL, FL. 32110

(904) 437-1814

(904) 437-1815

February 4, 1998

Division of Corporations P. O. Box 6327 Tallahassee, Fl. 32314

Re: Darra Homes, Inc.

#P98000003146

400002423744--4 -02/06/98--01067--008 *****35.00 *****35.00

Gentlemen:

Enclosed please find a Statement of Change of Registered Office And Registered Agent form together with a check in the sum of \$35.00.

Please send proof of this change to this office at your earliest convenience.

Very truly yours,

Kathy, Secretary to STEPHEN P. SAPIENZA

ks Enclosures

98 FEB -6 AN 9 29
SECRETARY OF STATE
TALLAHASSEE, FLORIO.

Jel 2/9

R.A. Change

Charter No. P98000003146
Date Filed _1/12/98

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida.

1.	The name of the corporation is: DARRA HOMES, INC.
2.	The name and address of its present registered agent is: Corporation Services Company 1201 Hays Street Tallahassee, Fl. 32301
3.	The name and street address to which its registered agent is to be changed is: (P.O. BOX NOT ACCEPTABLE)
	DONNA V. ALLMON
	30 Westmoreland Drive
	Palm Coast, Fl. 32164
4.	The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical.
5.	Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.
-	Downa V. Allmon, President Signature Out Ulmon (Typed or printed name and title) President ** Signature President**
	Date January 23, 1998
A A T A O	AVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE BOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY CCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER ND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE BLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA FATUTES.

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Date January

Please Print/Type Name