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Florida Department of State  
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Division of Corporations  
Fax Number : (850) 617-6380

Account Name : BERGER SINGERMAN - FORT LAUDERDALE  
Account Number : J20020000154  
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T. CLINE

OCT 14 2008

REGISTERED AGENT CHANGE

HH CYPRESS SPRINGS, LLC

Certificate of Status	0
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HO 8000-34726

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: HH Cypress Springs, LLC

2. (a) Principal office address of limited liability company: 55 NE 5th Avenue, 2nd Floor Delray Beach, FL 33483

(b) Mailing address of limited liability company: 350 E. Las Olas Blvd., Suite 1000 Ft. Lauderdale, FL 33301

3. Date of filing/registration in Florida: 9/25/2008 4. Document number: LO8000091211

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Corporation Company of Orlando Registered Office Address: 300 S. Orange Ave., Suite 1000 (BKG) Orlando, FL 32801-5403

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: BSPA Corporate Services, Inc. NEW Registered Office Address: 350 E. Las Olas Blvd., Suite 1000 Ft. Lauderdale, FL 33301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of James L. Berger (Signature of a member or authorized representative of a member)

James L. Berger, Authorized Rep. (Printed or typed name of signee)

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 complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: James L. Berger (Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

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