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September 27, 2011

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

VIA FEDERAL EXPRESS

Re: Defuniak Woodridge Partner, LLC and Defuniak Springs Woodbridge, LP

Dear Sir/Madam:

Enclosed please find the following documents:

1. An original and two (2) copies of Statement of Change of Registered Agent Office and Registered Agent for *Defuniak Woodridge Partner, LLC*.
2. An original and two (2) copies of Statement of Change of Registered Agent Office and Registered Agent for *Defuniak Springs Woodbridge, LLC*.
3. Our firm's check number 58141 in the amount of \$60.00 for the costs associated with the filing of these change forms; and
4. A self-addressed federal express mailer envelope.

Once these forms has been processed, please return to our office, in the enclosed self-addressed stamped envelope, a stamp file copy of each document. We are also e-mailing your office with a change of address of the principal office address for each of the entities.

Should you have any questions concerning this request, please do not hesitate to contact me. Thank you.

Sincerely,



Kimberly O. Carter, RP®, FRP
Paralegal to Gregory Q. Clark

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Defuniak Springs Woodridge, LP
Name of Limited Partnership or Limited Liability Limited Partnership
2. 8/18/2009 3. A09000000599
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

William J. Rea, Jr.
Name
100 South Bridge Lane, C213, Box 613266
Address
Watersound, FL 32431
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Jason White
Name
516 McKenzie Avenue
Florida street address (P.O. Box not acceptable)
Panama City FL 32401
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]
Signature of General Partner

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.

[Signature]
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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