2008 LIMITED LIABILITY COMPANY

FILED Jun 09, 2008 8:00 am Secretary of State 04-29-2008 90022 013 ***138.75

DOCUME 1. Entity Name WSG WEST P		HOLDING	S, LLC							
Principal Place of Business 400 ARTHUR GODFREY RD		·	Mailing Address 400 ARTHUR GODFREY RD				3	00090	83(
STE 200 MIAMI BEACH, FL 3	33140		STE 200 Miami Beach, FL 33	140		1 16871671 6			·	i ere l in de
2. Principal Place of Business - No P.O. Box #		Box #	3. Mailing Address							
Suite, Apt. #, etc.			Suite. Apt. #, etc.			03132008	Chg-LLC	CR2E0	33 (12/06)	ı
City & State			City & State			4. FEI Numb	per		-	pplied Fo
Zip	Country		Zip	Coun	itry	5. Certificati	e of Status Desired		55.00 Ad ee Require	
6.	eastbbA bns omsk	of Current Re	gistered Agent			7. Name an	d Address of New R	lagistered A	gent	
LAMONT NEW	AND INTERDUANT	DELLET	0.4		Name					
LAMONT NEIMAN INTERLAN & BELLET ONE BISCAYNE TOWER, 3550 TWO SOUTH BISCAYNE BLVD			P.A.		Street Address (P.O. Box Number is Not Acceptable)					
MIAMI, FL 33131					City				Zip Cod	
8. The above named entity submits this statement for							<u></u>	<u>FL</u>		
SIGNATURE	registered agent. Hyped or printed name of i	registered agent and	f use if applicable. (NC	OTE: Registered	d Agent signsture n#G	uired when feinstating)		DATE		
FILE NOV After May 1, 2	i typed or printed name of i	8.75 \$538.75			d Agent signature red	wed when (emitating)	Florida	e check pa a Departme		
FILE NOV After May 1, 2	i typed or printed name of i	18.75 \$538.75	\$/MANAGERS	10.		ured when reinstating)		e check pa a Departme	ent of Stat	
FILE NOV After May 1, 2 9. TITLE NAME STREET ADDRESS 1400	i typed or printed name of i	18.75 \$538.75 ING MEMBERS	S/MANAGERS DE Delice	10. Title Nami Stre	E E ET ADDRESS	ured when reinstating)	Florida	e check pa a Departme		
FILE NOV After May 1, 2	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS DE Delice #200 S140	10. Title Nami Stre	E E ET ADDRESS -S1-ZIP	ured when reinstating)	Florida	e check pa a Departme	ent of Stat	te Ad
FILE NOV After May 1, 2 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS DE Delice	10. ITTLE NAMI STRE CITY ITTLE HAME STRE	E Eet address -St-Zip	ured when reinstating)	Florida	e check pa a Departme	Change	
FILE NOV After May 1, 2 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS DE Delice #200 S140	10. ITTLE NAMI STRE CITY ITTLE HAME STRE	E ET ADDRESS -SI-ZIP E E ET ADDRESS -SI-ZIP	ured when reinstating)	Florida	e check pa a Departme	Change	
FILE NOV After May 1, 2 D. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS DET Delice #200 Delice	10. ITTLE NAMI STRE CTY- ITTLE NAME STRE CTY- TITLE NAME NAME	E ET ADDRESS -SI-ZIP E ET ADDRESS -SI-ZIP ET ADDRESS -SI-ZIP	ured when leinstating)	Florida	e check pa a Departme	Change	Ad
FILE NOV After May 1, 2 D. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS DET Delice #200 Delice	TO. TITLE NAMI STRE CITY- TITLE NAME STRE CITY- TITLE NAME STRE	E E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E E E	ured when reinstating)	Florida	e check pa a Departme	Change	Ad
FILE NOV After May 1, 2 TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS DET Delice #200 Delice	10. ITTLE NAMI STREE CITY TITLE NAME STREE CITY TITLE NAME STREE CITY TITLE TITLE TITLE TITLE	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP	ured when (einstaing)	Florida	e check pa a Departme	Change	Ad
FILE NOV After May 1, 2 FILE NOV After May 1, 2 FILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS Detrie 200 Detrie Detrie	TO. TITLE NAMI STREE COTY TITLE NAME STREE COTY TITLE NAME STREE COTY TITLE NAME NAME NAME NAME NAME NAME NAME NAM	E E ET ADDRESS -ST-ZIP E E	ured when (einstaing)	Florida	e check pa a Departme	Change	Ad
FILE NOV After May 1, 2 D. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS Detrie 200 Detrie Detrie	10. ITTLE NAMI STRE CITY- ITTLE NAME STRE CITY- TITLE CITY- TITLE NAME STRE CITY- TITLE NAME STRE STRE STRE STRE	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP	ured when leinstating)	Florida	e check pa a Departme	Change	Ad
FILE NOV After May 1, 2 FILE NOV After May 1, 2 FILE NOV After May 1, 2 FILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS Detrie 200 Detrie Detrie	10. ITTLE NAMI STRE CITY- ITTLE NAMI STRE CITY- TITLE	E E E E E E E E E E E E E E E E E E E	ured when reinstating)	Florida	e check pa a Departme	Change	Ad
FILE NOV After May 1, 2 FILE NOV After May 1, 2 FILE NOV After May 1, 2 FILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS Deltre 200 Deltre Deltre Deltre	10. ITTLE NAMI STRE CITY- TITLE NAMI STREIC CITY- TITLE CITY- TITLE CITY- TITLE CITY- TITLE NAMI STREIC CITY- TITLE NAMI STREIC CITY- TITLE NAMI NAMI NAMI	E E E ET ADDRESS -SI-ZIP E E	ured when reinstating)	Florida	e check pa a Departme	Change Change	Ad
FILE NOV After May 1, 2 9. TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS Deltre 200 Deltre Deltre Deltre	10. ITTLE NAMI STRE CITY- TITLE NAMI STREI CITY- TITLE CITY- TITLE CITY- TITLE NAMI STREI STRE	E E E E E E E E E E E E E E E E E E E	ured when (einstaing)	Florida	e check pa a Departme	Change Change	Ad
FILE NOV After May 1, 2 FILE NOV After May 1, 2 FILE NOV After May 1, 2 FILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS Deltre 200 Deltre Deltre Deltre	10. ITTLE NAMI STRE CITY- TITLE NAMI STREI CITY- TITLE CITY- TITLE CITY- TITLE NAMI STREI STRE	E E E E E E E E E E E E E E E E E E E	ured when leinstating)	Florida	e check pa a Departme	Change Change	Ad
FILE NOV After May 1, 2 FILE NOV After May 1, 2 FILE NOV After May 1, 2 FILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS Delete # 200 Delete Delete	10. ITTLE NAMI STREE CITY- TITLE NAMI	E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E ET ADDRESS	ured when teinstating)	Florida	e check pa a Departme	Change Change Change	Ad
FILE NOV After May 1, 2 9. TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE	VIII FEE IS \$13 DOB Fee WIII be	18.75 \$538.75 ING MEMBERS	S/MANAGERS Delete # 200 Delete Delete	10. ITTLE NAMI STREE CITY- TITLE NAMI STREE	E E E ET ADDRESS -ST-ZIP E	ured when reinstating)	Florida	e check pa a Departme	Change Change Change	Ad

4/24/08