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COVER LETTER

Division of Corporations	
SUBJECT:	HILLVIEW GUILD LLC
	Name of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/R	egistered Office Change and fee(s) are submitted for filing.
Please return all correspondence of	concerning this matter to the following:
LEWIS M. OL Name of Perso	······································
QUIÑONES & OL Firm/Company	IVER, P.L.
11513 LAKE UNDERHIL Address	L ROAD, SUITE A
ORLANDO, Fl City/State and Zip	
OLIVER@GAOL E-mail address: (to be used for future a	AW.COM annual report notification)
For further information concerning	g this matter, please call:
LEWIS M. OLIVER I	/
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADD Registration Section Division of Corporations Clifton Building 2661 Executive Center Circl Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327
Enclosed is a check for t	he following amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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.

Name of the limited liability company:	HILLVIEW GUILD LLC	
2. (a) Principal office address of limited liability compa	ny:	
(Note: MUST BE STREET ADDRESS)	22 JALAN ZAMRUD SINGAPORE NA 6686155 OC	
(b) Mailing address of limited liability company:	AHASS T	
(Note: MAY BE POST OFFICE BOX)	22 JALAN ZAMRUD SINGAPORE NA 66861-5 C TO	
7/28/2010	L100000790	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:	
Registered Agent:	QUIÑONES & OLIVER, P.L.	
Registered Office Address:	11555 LAKÉ UNDERHILL ROAD SUITE E ORLANDO, FL 32825	
NEW Registered Agent: NEW Registered Office Address:	11513 LAKE UNDERHILL ROAD	
(MUST BE FLORIDA STREET ADDRESS)	SUITE A ORLANDO,FL32825	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as oth or the operating agreement of the limited liability compa	e laws of the State of Florida, it is hereby Florida street address of the registered office ntical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote erwise provided in the articles of organization ny.	
Lewis M. Oliver III, Authorize		
I hereby accept the appointment as registered agent and comply with the provisions of all statules relative to the pand I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to hadress. I hereby confirm that the limited liability compo	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office iny has been notified in writing of this change.	
Signature of Registered Agent		

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