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SECRETARY OF STATE
ARELAHASSEE. FLORIDA

T. CLINE

APR 14 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Westport Holdings Hidden Springs, LLC (Name of Limited Liability Company)
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)
Gary, Dytrych & Ryan (Virm/Company)
701 US High way One S.402 器 置
North Palm Beach, FL 33408 (City/State and Zip Code)
For further information concerning this matter, please call:
Susan Rosset at (561) 674-1275 (Name of Person) (Area Code & Daytime Telephone Number)
CTD TOTAL COLUMN A DED DOG

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the 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 608.50 company submits the following statement in order to char in the State of Florida.	8, Florida Statutes, the undersigned limited liability age its registered office or registered agent, or both,
1. Name of the limited liability company: Westport	Holdings Hidden Springs, LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	VIJGO NJO9 Kd. S. 102 Palm Beach Fardens, FC 33418
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Co Gary, Dytruch & Ryan 701 US Highway One. S. 402 North Pallm Beach, FL 33408
10/27/2000 3. Date of filing/registration in Florida	M00000002234 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Lawrence L. Lawrence
Registered Office Address:	3801PGA Blvd. \$7865 The PalmBeachGarder Francis
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	John Gary En 8
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	JoryhfalmBeach, FL33408
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles of limited liability company.	et address of the registered office and the business ase of a Florida limited liability company, it is
Jusan Ham	
(Signature of a member or authorized representative of a member) Susan Rosser, Controller (Printed or typed name of signee)	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	agree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.

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

INHS18 (05/08)

(Signature of Registered Agent)