## Mb300000 1175

(Re	questor's Name)	
(Address)		
		•
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
<b>(</b> Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Coples	_ Certificates	of Status
Special Instructions to Filing Officer:		
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		}

Office Use Only



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SECRETARY OF STATE
SECRETARY OF STATE

M03/11/5



January 5, 2005

FLORIDA SECRETARY OF STATE Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: HOLLYWOOD HILLS HOLDINGS, LLC

Dear Filing Officer:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations, for the above referenced name, which is to be filed in your office. Also enclosed is check #7911 in the amount of \$25.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions, please contact x123 at 800-345-4647.

Thank you,

Delanie Case

Registered Agent Services

Enclosures

2005 JAN 10 PH 1: 37
SECRETARY OF STATE
ANASSEE, FLORIDA

PO BOX 1831 AUSTIN, TX 78767

## 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.

agent, or both, in the state of Fibrida.	
1. The name of the limited liability company is:	HOLLYWOOD HILLS HOLDINGS, LLC
2. The mailing address of the limited liability co	ompany is :
2600 Citadel Plaza Drive, Suite 300,	Houston, TX 77008
4/14/03	M0300001175
3. Date of filing/registration in Florida	4. Document number
Florida Department of State:	tered office address as shown on the records of the
CT Corporation S	Name
1200 South Pine I	
Plantation, FL 33	Address 3324
City,	State and Zip
6. The name and address of the new registered as	gent and/or office:
Capitol Corporate	Services, Inc.
1333 North Duval	Name
	s (P.O. Box NOT acceptable)
	• •
<u>Tallahassee</u>	FL 32303 FE SE
• /	under the laws of the State of Florida, it is the rely
confirmed that after the change or changes are mand the business office of the registered agent wi	ade, the Florida street address of the registered office all be identical. Or, in the case of a Florida limited change(s) was/were authorized by an affirmative vote off as otherwise provided in the articles of organization or ompany.
M. Candace DuFour, Sr. VP/Sec.	
(Printed or typed name of signee)	
- • · · · · · · · · · · · · · · · · · ·	gent and agree to act in this capacity. I further agree to e to the proper and complete performance of my autics, s of my position as registered agent as provided for in filed to merely reflect a change in the registered office ty company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99) FILING FEE: \$25.00