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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: MS-HHA II, Inc.	(Name of Corporation)
DOCUMENT NUMBER: P0200002	2106
The enclosed Statement of Change of Re	egistered Office/Agent and fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
Yvonne G. Grassie	e, Esq.
	(Name of Contact Person)
Jones, Walker, Wa	aechter, Poitevent, Carrere & Denegre, LLP (Firm/Company)
601 Brickell Key Dr	íve, Suite 500 (Address)
Miami, Florida 3313	1 (City/State and Zip Code)
For further information concerning this	matter, please call:
Yvonne G. Grassie, Esq. (Name of Contact Person	at (305) 679-5724 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payabl	e to the Department of State.
Malling Addres Amendment Se Division of Co P.O. Box 6327 Tallahassee, F.	orporations Division of Corporations Clifton Building

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this cange is submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: MS-HHA II, Inc.	
2. The principal Miami, Flor	l office address: 1400 N.E. Miami Gardens Drive, Ste. 200	
3. The mailing a	address (if different):	
4. Date of incor	rporation/qualification: 02/26/02 Document number: P02000022106	
	nd street address of the current registered agent and registered office on file with the surfment of State:	
	Craig M. Dorne, F.A.	
	407 Lincoln Road, PH SE	į.
	Miami Beach, FL 33139	j
6. The name and (if changed):		7 24 5.
	TVOITILE G. Grassie, Esq.	S
	601 Brickell Key Drive, Suite 500 (P.O. Box NOT acceptable)	
	Miami, Florida 33131	
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, I be identical.	
Such change wa	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
Ho	Harley Sykes (Printed or typed name and title)	
I hereby accept I further agree of my duties, an document is be corporation has	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.	
	8/28/07	
- 7 III - T	ehalf of an entity:	
	Typed or Printed Name)	

* * * FILING FEE: \$35.00 * * *

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)