P10000100094

!	(Requestor's Name)	
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Certified Copies	Certificates of Status	_
Special Instructions	to Filing Officer:	

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TO: Amendment Section Division of Corporations		
SUBJECT: Westbury love Lane Ohe, Inc. Name of Corporation		
DOCUMENT NUMBER: P10000100094		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Andrea Fuller Name of Contact Person		
Westbury Cove Lane One True.		
2385 Tower Prive		
Maples FL 34104 Chy/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Hadea Fulton at (239) (87-5830) Name of Contact Person Area Code & Daytime Telephone Number		
Area Code & Daytime Telephone Number		

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

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