F93000004961

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C. Coulliette JAN 2 0 2006



ON TERVICE COMPANY.					
ACCOUNT NO. : 072100000032					
REFERENCE : 814319 4813078					
AUTHORIZATION : melbele man					
COST LIMIT : \$ 25.00					
ORDER DATE: January 16, 2006					
ORDER TIME: 10:34 AM					
ORDER NO. : 814319-420					
CUSTOMER NO: 4813078					
CHANGE OF AGENT					
NAME DAIN HOODING CONDAIN					
NAME: PALM HOSPITALITY COMPANY					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY					
XX PLAIN STAMPED COPY					
CONTACT PERSON: Troy Todd					
EXAMINER'S INITIALS:					

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

statement of cha	nge is submitted	d for a corporation orga	502, 607.1508, or 617.1508, Florida Statutes, this unized under the laws of the State of California stered agent, or both, in the State of Florida.
	•	PALM HOSPITALITY	•
1. The name of t	ne corporation:	2000 77 1 . 4	G 14 0400 D 14 1 GA 01504 5750
2. The principal	office address:_	3900 West Alameda Ave	enue, Suite 2400, Burbank, CA 91521-6760
3. The mailing a	ddress (if differ	ent): 500 South Buena V	Tista Street, Burbank, CA 91521-0586
4. Date of incorp	oration/qualific	cation: 11/02/1993	Document number: F93000004961
	l street address of tment of State:	of the current registered	agent and registered office on file with the
	CT Corporation	n System	7AL 2
	1200 South Pin	e Island Road	LAHA
	Plantation, FI		N20 N20 SSEE
6. The name and (if changed):	street address o	of the new registered ago	ent (if changed) and /or registered office
	Corporation Se	rvice Company	77 7A
	1201 Hays Stre	eet	
		(P.O. Box NOT acceptable	ie)
	Tallahassee, FL	_ 32301	
The street addre as changed will	ss of its registe be identical.	ered office and the stree	et address of the business office of its registered agent,
Such change wa authorized by th	is authorized by ie board, or the	y resolution duly adopte corporation has been r	ed by its board of directors or by an officer so notified in writing of the change.
Muur	UU re of an officer or di	(rector)	Maureen Cullen, Attorney in Fact (Printed or typed name and title)
· -		•	and agree to act in this capacity. Intutes relative to the proper and complete performance bligation of my position as registered agent. Or, if this the registered office address, I hereby confirm that the e.
By: Signature of Registered Agent)			01/16/2006 (Date)
If signing on bel			· · · · · · · · · · · · · · · · · · ·
Elizabeth A. Dawson, Asst. Vice President			
(Typed or Printed Name)			

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