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ASSOCIATED LUXURY HOTELS INTERNATIONAL HOLDINGS,

LLC

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AUTHORIZATION: ABBIE/PAUL HODGE

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

I. N	ame of the limited liability company: Associated	Luxury Hot	els International I	Holdings, LLC	
(.,)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·	(b) Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)		
	2295 S. Hiawassee Road, Suite 306	2	295 S. Hiawasse	e Road, Suite 306	
	Orlando, FL 32835		Orlando, FL 3283	5	
	March 10, 2003	L	3000008655		
3.	Date of filing/registration in Florida	4.	Document i	number	
5. (a)					
J. (u)	Registered Agent and Registered Office shown on the records of	of the Florida De	pt. of State:	· · ·	
	Corporation Service Company			57 T	
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS)		Black Free Ed	
	1201 Hays Street			29	
	Tallahassee	,32301-26	525		
	, r	·L		ب	
(b)				 ن 2	
ν-,	Enter name of NEW Registered Agent and/or NEW Registered	ed Office addre	<u> </u>	*	
	Paracorp Incorporated				
	NEW Registered Office Address:	·			
	155 Office Plaza Drive, 1st Floor				
				• • •	
	Tallahassee , F	L 32301			
the cha agent w was/we	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited in authorized by an affirmative vote of the members cless of organization or the language agreement of the	aws of the Sta of the register liability comp of the limited e limited liab	ed office and the bus any, it is hereby conf I liability company of lity company	iness office of the registered firmed that the change(s) r as otherwise provided in	
	MU Wast	Micha	el R. Coutu, CFO		
_	ure of a member or authorized representative of a member		Printed or type	ed name of signee	
provision The oblination	by accept the appointment as registered agent and agons of all statutes relative to the proper and completing its assenting to the proper and completing at the proper and completing the status of my position as registered agent as providing reflect a change in the registered office address, I in writing of this change.	e performanc led for in Cha I hereby confi	e of my duties, and Loter 605, F.S. Or, if, and the limited lie	er agree to comply with the am familiar with and accept this document is being filed ability company has been	
Str	SHARON COOKE, ASSIS	TANT SEC	RETARY	•	
ារជាពេល	e of Registered Agent				