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B. KOHR

APR 25 2008

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 527039 7454283

AUTHORIZATION

[Signature]

COST LIMIT : \$35.00

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TALLAHASSEE, FLORIDA

ORDER DATE : April 13, 2008

ORDER TIME : 9:38 AM

ORDER NO. : 527039-490

CUSTOMER NO: 7454283

CHANGE OF AGENT

NAME: HPT MANAGEMENT SERVICES LP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Cindy Harris

EXAMINER'S INITIALS: _____

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. HPT MANAGEMENT SERVICES, LP

Name of Limited Partnership or Limited Liability Limited Partnership

2. 02/29/2008

Date of filing/registration in Florida

3. B08000000045

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System

Name

1200 South Pine Island Road

Address

Plantation, FL 33324

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box not acceptable)

Tallahassee FL 32301

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.


Signature of General Partner

Maureen Cullen, Authorized Person on behalf of IMS, LLC - General Partner

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: 
Signature of Registered Agent

Elizabeth A. Dawson, Asst. Vice President

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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