

B98000000403



ACCOUNT NO. : 072100000032

REFERENCE : 917533 7138101

AUTHORIZATION :

COST LIMIT : \$ 35.00

Patricia Pigg

FILED
00 DEC -8 AM 10:03
TALLAHASSEE, FLORIDA

ORDER DATE : December 4, 2000

ORDER TIME : 4:46 PM

ORDER NO. : 917533-245

CUSTOMER NO: 7138101

CUSTOMER: Beverly M. Houston, Legal Asst
Wyndham International
Suite 6001
1950 Stemmons Frwy
Dallas, TX 75207

300003488753--6

CHANGE OF AGENT

NAME: WYNDHAM HPT LESSEE, L.P.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

12/6

CONTACT PERSON: Ta-tanisha Adams

RECEIVED
00 DEC -6 AM 8:51
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. WYNDHAM HPT LESSEE, L.P.
Name of the limited partnership

2. JUNE 17, 1998 3. B98000000403
Date of filing/registration in Florida Document number assigned

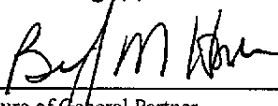
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T CORPORATION SYSTEM
Name
1200 SOUTH PINE ISLAND ROAD
Address
PLANTATION, FLORIDA 33324
City, State and Zip

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

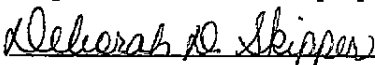
Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box not acceptable)
Tallahassee FL 32301
City, State and Zip

6. Such change(s) was/were authorized by the general partners.


Signature of 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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Corporation Service Company


Signature of Registered Agent

Deborah D. Skipper
Asst. Secretary

**Make checks payable to Florida Department of State and mail to:
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**

FILED
00 DEC -6 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA