

F95000002655

ACCOUNT NO. : 072100000032

REFERENCE : 675837

4809148

AUTHORIZATION :

COST LIMIT :

35 hatricia 14

ORDER DATE: July 23, 2002

ORDER TIME : 8:40 AM

ORDER NO. : 675837-005

CUSTOMER NO: 4809148

CUSTOMER: David Marote, Legal Asst

Hilton Hotels Corporation 9336 Civic Center Drive

Beverly Hills, CA 90210

CHANGE OF AGENT

NAME: PROMUS HOTELS FLORIDA, INC.

400006720694--2

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Carla E. Lohi

C. Coulliste JUL 2 9 2002

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

Pursuant to the provisions of sections 007.030 the undersigned corporation organized under th	e laws of the State of Delaware
•	nge its registered office or registered agent, or both, in
the State of Florida. 1. The name of the corporation:PROMUS_HOTEL	S FLORIDA, INC.
1. The hame of the corporation:	
2. The mailing address of the corporation: 933	6 Civic Center Dr., Beverly Hills, CA 90210
3. Date of incorporation/qualification: 06/01/1	995 Document number: <u>F95000002655</u>
4. The name and address of the current registered	d agent and office: TALLAHASSEE, FI
CT Corporation System	
1200 South Pine Island Rd.	LARY LARY
Plantation, FL 33324	HO E
	gent (if changed) and/or registered office (if Banged):
	Not Acceptable)
Corporation Service Company	
1201 Hays Street	· · · · · · · · · · · · · · · · · · ·
Tallahassee, Florida 32301	<u> </u>
agent, as changed, will be identical.	e street address of the business office of its registered
Such change was authorized by resolution duly	adopted by its board of directors or by an officer so
	7/10/-2
(Signature of an officer, chairman or vice chairman o	f the board) (Date)
1/ 1	
K.AUEN ANDERSON VICE PRESTDENT (Printed or typed name and title)	<u>) </u>
Having been named as registered agent and to corporation, I hereby accept the appointment a I further agree to comply with the provisions of performance of my duties, and I am familiar w registered agent.	accept service of process for the above stated is registered agent and agree to act in this capacity. fall statutes relative to the proper and complete ith and accept the obligation of my position as
Kowa P. Signature of Registered Agan)	7/z 9/o2 (Date)
If signing on behalf of an entity:	ura R. Dunlap as its agent
(Typed or Printed Name)	(Capacity)
* * * FILIN	G FEE: \$35.00 * * *

CR2E045(9/00)