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C T CORPORATION SYSTEM			
Requestor's Name 660 East Jefferson Stre	et		
Address Tallahassee, FL 32301 City State Zip	(850)222-1092 Phone	40	000029722242 -08/27/9901062016 *****35.00 ******35.00
CORPORAT	ION(S) NAME		
			RA
			THE ST
	Promus Hotels.	Toc	27 PH SEE, FL
			4: 18 DRIDA
() Profit() NonProfit() Limited Liability Compa	() Amendm		() Merger
() Foreign	() Dissoluti	on/Withdrawal	() Mark
() Limited Partnership () Reinstatement	() Annual F () Reserva	Report tion	() Other Change of R.A. () Fictitious Name
() Limited Liability Part () Certified Copy	() Photo C		() CUS
() Call When Ready Walk In () Mail Out	() Call if Pr () Will Wai	t	() After 4:30 Pick Up
Name Availability 3099 Document Examiner Updater Verifier	8/27	PLEASE	RETURN EXTRA COPY(S); FILE STAMPED THANKS CONNIE BRYAN
Acknowledgment	•		-

W.P. Verifier

Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, Florida Statutes, the undersigned corporation organized under the laws Delaware submits the following statement in order to change its or registered agent, or both, in the State of Florida.	of the State of
1a. The name of the corporation is: Promus Hotels, Inc.	
1b. Date of incorporation 6/21/95 Document number	per_F95000003004
2. The name and address of the current registered agent and office:	99 AUG SECNET
Corporation Service Company	2 SS
1201 Hays Street, Tallahassee, FL 32301	
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM	PH 4 18 FLORIDA
c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Planta	tion Florida 33324
The street address of its registered agent and the street address of the of its registered agent as changed will be identical. Such change was authorized by resolution duly adopted by its board of an officer so authorized by the board. J. Kendall Hu Executive Vice P	f directors or by
DATE	
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SPROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH A THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.	CE DESIGNATED REGISTERED EE TO COMPLY OPER AND COM- AND ACCEPT
SIGNATURE BY: (Registered A	igent) John J. Linnihan.
DATE august 25 19	99 Asst. Vice Presiden
Division of Cornerations P.O. Roy 6327 Tallahasse	o Fl 32314

CR2E045 (7-91) Filing Fee: \$35.00