

Jun 20 2007 3:29 PM

A1A CORPORATE SERVICES

1557-659035

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Division of Corporations

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To:

Division of Corporations
Fax Number : (850)205-0380

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REGISTERED AGENT RESIGNATION

SUNRISE HOTEL MANAGEMENT L.L.C.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

PAUL SMITH

(Name of Registered Agent)

, hereby resigns as

Registered Agent for **SUNRISE HOTEL MANAGEMENT L.L.C.**

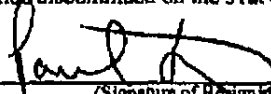
(Name of Limited Liability Company)

L02000011363

(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS17 (08/05)

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