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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. S. & G. Hotel Management, LLC 1. The name of the limited liability company is: 2. The mailing address of the limited liability company is : 7900 South Orange Blossom Trail Orlando, Florida 32809 06/19/02 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: BUSINESS FILINGS INCORPORATED Name 1000 WEST AVE., SUTIE 1114 Address MIAMI BEACH FL 33139 City, State and Zip 6. The name and address of the new registered agent and/or office: Greg Wright 4401 Vineland Rd. Suite A-16 Florida street address (P.O. Box NOT acceptable) Orlando. 32811 City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) Greg Wright (Printed or typed name of signee) the appointment as registered agent and agree to act in this capacity. I further agree to provisions of all statutes relative to the proper and complete performance of my duties, it with and accept the obligations of my position as registered agent as provided for in S. Or, if this document is being filed to merely reflect a change in the registered office y confirm that he limited hability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

9) FILING FEE: \$25.00