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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 28, 2007

SCOTT SOSSO 130 N. TAMIAMI TRAIL SARASOTA, FL 34236

SUBJECT: SARASOTA RITZ MANAGEMENT, L.L.C.

Ref. Number: L03000002291

We have received your document for SARASOTA RITZ MANAGEMENT, L.L.C., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist Letter Number: 607A00014551

STATEMENT OF CHANGE OF REGISTERED GFEIGE 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.

agem, or both, in the state of Pioriaa.
1. The name of the limited liability company is: Sarasota Ritz Managemen.+
2. The mailing address of the limited liability company is: 130 N. Tamiami Trail.
Sarasota, FL 34236
10300000000
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Cleorge Mazzaratani
City, State and Zip
6. The name and address of the new registered agent and/or office: Scott Sosso Name 130 N. Tomiqmi T(a) Florida street address (P.O. Box NOT acceptable) Socosota FL 34236 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 of authorized representative of a member) (Printed or typed name of signee) 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 as provided for in Chapter of P. F. Or, if this document is being filed to merely reflect a change in the registered office address, hereby confirm that the limited liability company has been notified in writing of this change.
(Signature of Registered Agent) Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00



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(Signature of a member of authorized representative of a member) (Printed or typed name of signee)
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(Signature of Registered Agent)
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00