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SECRETARY OF STATE

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.

1.	The name of the limited liability company is: TME Lodging, LLC
2.	The mailing address of the limited liability company is: TME Lodging, LLC c/o Gustavus Bass,
	apital Asset Advisors, Inc., P. O. Box 13667, Research Triangle Park, NC 27709
10	D/08/2003 L03000038462
	Date of filing/registration in Florida 4. Document number
	The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
	Ierris Robinson
	Name 12628 Arley Drive Address Address
	Oriando, FL 34786
	City, State and Zip
6. ′	The name and address of the new registered agent and/or office:
	Corporation Company of Orlando
	Name 300 S. Orange Avenue, Suite 1000 (MRH)
	Florida street address (P.O. Box NOT acceptable)
	Orlando FL 32801
	City, State and Zip
cor and lial the	the limited liability company is not organized under the laws of the State of Florida, it is hereby after the change or changes are made, the Florida street address of the registered office of the business office of the registered agent will be identical. Or, in the case of a Florida limited bility company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of members of the limited liability company or as otherwise provided in the articles of organization or operating agreement of the limited liability company.
(Sig	mature of a member or authorized representative of a member)
G	ustavus Bass, Manager
•	inted or typed name of signee)
I R cor and Ch add	nereby accept the appointment as registered agent and agree to act in this capacity. I further agree to apply with the provisions of all statutes relative to the proper and complete performance of my duties, at I am familiar with and accept the obligations of my position as registered agent as provided for in apter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office dress, I hereby confirm that the limited liability company has been notified in writing of this change.
769	Corporation Company of Orlando
(34)	gnature of Registered Agent) By: J. Gregory Humphries, Vice President
	Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00