Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : BUSINESS FILINGS

Account Number: 105256001620 Phone : (608)827-5300

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## REGISTERED AGENT CHANGE

## NEW STERLING RESORTS, LLC

Certificate of Status	0
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FEB -4 2009

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Corporate Filing Menu

EHRAMINER

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

Pursuant to the provision liability company submits agent, or both, in the State	ns of sections 608,416 or 608,508, Floric s the following statement in order to chan e of Florida.	da Statutes, the undersigned limite ge its registered office or registered	d d
1. The name of the limite	d liability company is: New Sterling Resorts, I	LLC	٠.
2. The mailing address of	the limited liability company is:		
5005 LBJ Freeway Stc. 1200	Dallas, Texus 75244		
8/20/2004	L04000	061825	-
3. Date of filing/registrati		cument number	_
5: The name of the register Florida Department of	ered agent and the registered office address State:		
•	HALL, STEVEN K	TAS 28	
	Name 4399 COMMONS DRIVE EAST, Suite 300	28 <b>9</b>	
	Address DESTIN FL 32541	TARY TARSSE	
	City, State and Zip		r (
6. The name and address	of the new registered agent and/or office:	AH 8: 10	A COL
	Business Filings Incorporated		
	Name 1203 Governors Square Blvd, Suite 101,		
	Florida street address (P.O. Box NOT ac	cceptable)	
	Tallahassec, Florida, 32301-2960	•	
	City, State and Zip		
confirmed that after the cl and the business office of liability company, it is her the members of the limite	pany is not organized under the laws of the nange or changes are made, the Florida strethe registered agent will be identical. Or, is reby confirmed that the change(s) was/wered liability company or as otherwise provided the limited liability company.	et address of the registered office in the case of a Florida limited authorized by an affirmative vote o	f
(Signature of a member or authori			
Alan L. Murray. Asst. Sec. of	managing member ENCORE STERLING INVES	TORS, LLC	
(Printed or typed name of signee)	239 21.0010/11.0101110 1144 110		
I hereby accept the appoint the appoince of the comply with the provision and I am familiar with an acceptance of the complete	ntment as registered agent and agree to ac s of all statutes relative to the proper and c d accept the obligations of my position as r his document is being filed to merely reflec that the limited liability company has been	t in this capacity. I further agree to complete performance of my duties, egistered agent as provided for in it a change in the registered office notified in writing of this change.	

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

INHS18(10/99)

(Signature of Registered Agent)

**FILING FEE: \$25.00** 

\_\_\_\_Mark Williams A.V.P., Business Filings Incorporated.