

Electronic Filing Cover Sheet

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(((H090001817183)))



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To:

Division of Corporations

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: (850)617-6383

From:

Account Name : SALVATORI & WOOD, BUCKEL & WEIDENMILLER, PL

Account Number : I20030000112

Phone

: (239)552-4100

Fax Number

: (239)649-1706

## REGISTERED AGENT CHANGE

GM HOTEL MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	I
Page Count	01
Estimated Charge	\$87.50

C. LEWIS

AUG 1 4 2009

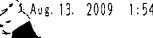
**EXAMINER** 

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\$55.00



## H09000181718 3

## 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.

<del>-</del>	
1. Name of the limited liability company:	GM Hotel Management, LLC
2. (a) Principal office address of limited liability com	apany: 4001 Tamiami Trail N, Suite 350
(Note: MUST BE STREET ADDRESS)	Naples FL 34103
(b) Mailing address of limited liability company;	4001 Tamiami Trail N. Suite 350
(Note: MAY BE POST OFFICE BOX)	Naples, FL 34103
06/07/2005	L05000056190
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown	n on the records of the Florida Dept. of State:
Registered Agent:	Michael Joseph
Registered Office Address:	999 Vanderbilt Beach Rd #610 Naples FL 34108
NEW Registered Agent:  NEW Registered Office Address:	Salvatori Wood Buckel Weidenmiller PL 9132 Strada PL 4th Fl
<del></del>	Salvatori vvood Buckei vveidenmilier PL
MUST BE FLORIDA STREET ADDRESS)	Naples
If the limited liability company is not organized under confirmed that after the change or changes are made, t and the business office of the registered agent will be i liability company, it is hereby confirmed that the chang of the members of the limited liability company or as or the operating agreement of the limited liability company or as or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company of the operations of all statutes relative to the and I am familiar with and agree the obligations of many chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability company	the laws of the State of Florida, it is hereby the Florida street address of the registered office identical. Or, in the case of a Florida limited ge(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization pany.
Signature of Registered Agent	npany has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)