

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

: C T CORPORATION SYSTEM Account Name

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. : (850)878-5368

REGISTERED AGENT CHANGE

HARBOR HOTEL INVESTORS, LLC

Certificate of Status Certified Copy 0 Page Count 02 Estimated Charge

S. HAWKES JUL 2/8 2009

EXAMINER

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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 608.50 company submits the following statement in order to char	8, Florida Statutes, the undersigned limited liability
in the State of Florida.	
1. Name of the limited liability company: HARBOR HOTEL INVESTORS, LLC	
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	AMELIA ISLAND FI. 32034
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1555 PIPER DUNES PL AMELIA ISLAND FL 32034
4/25/2007	L07000044036
	4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
Registered Agent:	A.G.C. CO.
Registered Office Address:	200 S. ORANGE AVENUE. Suite 2300 CORLANDO FI, 32801 US
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: CT Corporation System	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Plantation,FL 33324
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)	
(Printed or typed name of signes)	-
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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby consent that the limited liability company has been notified in writing of this change.	
Madonna Cuddihy (Signature of Registered Agent) Special Assistant Secretary	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00	

INHS18 (05/08)