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COVER LETTER

	Legistration Section Division of Corporations				
SUBJEC	International Resorts Management Group LLC				
	Name of Limited Liability Company				
Dear Sir o	or Madam:				
The enclo	osed Registered Agent/Registered Office Cha	nge and fe	ee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:					
Edward	W Biel				
	Name of Person	 .	_		
International Resorts Management Group LLC					
	Firm/Company		-		
18	8001 Collins Ave.				
	Address	•	-		
Sunny Is	sles Beach, Florida 33019				
	City/State and Zip Code		-		
ebiel@t	rumpmiami.com				
E-m	ail address: (to be used for future annual repo	rt notifica	ation)		
For furthe	r information concerning this matter, please of	call:			
Ed Biel	3	05	692-5630		
	Name of Person		Area Code & Daytime Telephone Number		
Ro Di Ci 26	Registration SectionRegiDivision of CorporationsDiviClifton BuildingP.O.		LING ADDRESS: stration Section sion of Corporations Box 6327 hassee. Florida 32314		
Enclosed is a check for the following amount:					
Ø	\$25 Filing Fee	□ \$55	Filing Fee & Centified Copy		
INHS18 (2/	(14)				

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

l. Na	Name of the limited liability company: International Resorts Management Group LLC			
2. (a)	18001 Collins Ave.	(b)	same	
. ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Sunny Isles Beach, Florida 33019			
	11/13/2007	L	L07000114744	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Simpley Legal LLP			
` '	Registered Agent and Registered Office shown on the records of t	he Florida l	Dept. of State:	
	Kristina Wilson Esq.			
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	<u>~~</u>	
	1200 Brickell Avenue Suite 850		2019	
	Miami	33131		
	, f l ₂ ,			
(b)	Edward W. Biel		PI :	
` ,	Enter name of NEW Registered Agent and/or NEW Registered	Office add	dress:	
	EdwardW.Biel 18001 Collins Ave		: 1,2	
	NEW Registered Office Address:			
	Sunny Isles Beach			
		33160		
	······································			
he cha agent v vas/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liag ore authorized by an affirmative vote of the members of cles of organization or the sperating agreement of the	the regist ibility cor f the limit	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) afted liability company or as otherwise provided in	
X	I med Deire		da Geyer Member Manager	
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee	
I herei provisi he obl to merg	by accept the appointment as registered agent and agr ons of all statules relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I t	ee to act i performa d for in Ci tereby con	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and acce Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been	

Signature of Registered Agent