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ATTORNEYS AT LAW

WAYNE M. PATHMAN, P.A. HAROLD L. LEWIS, P.A. ROGER SLADE* ALEX KURKIN JAMES B. MILLER DAVID E. SACKS ELSA M. FIGUERAS GEORGE J. BATARSEH "also admitted to practice in New York, New Jersey & Connecticut

ONE BISCAYNE TOWER · SUITE 2400 2 SOUTH BISCAYNE BOULEVARD MIAMI, FLORIDA 33131

TELEPHONE (305) 379-2425 TELECOPIER (305) 379-2420

ANTOINETTE SALMON asalmon@pathmanlewis.com

October 26, 2000

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

Re:

Change of Registered Agent for

Cardel at Sawgrass, L.C. Cardel Hospitality Group, L.C. Cardel Hotel Development, L.C.

Dear Sirs or Madams:

Enclosed please find Statement of Change of Registered Agent forms for the abovereferenced companies and filing fee amount of \$25.00 for each of the companies.

Please contact me should you have any questions. Thank you for your assistance in this matter.

Sincerely,

PATHMAN LEWIS, LLP

Toni Salmon Paralegal

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Encl

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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 608.508, 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: Cardell Hotel Development,	L.C.
2. The mailing address of the limited liability company is: 3255 NW 87th Avenue,	Miami, FL 33172
February 24, 1997 <u>L97000000223</u>	· · · · · · · · · · · · · · · · · · ·
3. Date of filing/registration in Florida 4. Document number	
5. The name of the registered agent and the registered office address as shown on the rec Florida Department of State:	cords of the
Dade Corporate Services, Inc.	
Name	
2300 Coral Way, Suite 103	, Q P
Address	
Miami, Florida 33172 City, State and Zip	
6. The name and address of the new registered agent and/or office:	SEGRETARY OF COR
Roger Slade	OF STATE OR ORPORATION
Name	ATTE
2 South Biscayne Boulevard, Suite 2400	25 SE
Florida street address (P.O. Box NOT acceptable)	
Miami FL 33131	
Miami FL 33131 City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida, it confirmed that after the change or changes are made, the Florida street address of the regard the business office of the registered agent will be identical. Or, in the case of a Flor liability company, it is hereby confirmed that the change(s) was/were authorized by an a the members of the limited liability company or as otherwise provided in the articles of the operating agreement of the limited liability company.	gistered office ida limited ıffirmative vote of
(Signature of a member or authorized representative of a member)	
ROGER SINDE	
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and complete performant and I am familiar with and accept the obligations of my position as registered agent as Chapter 608, Fl.S. Or, if this document is being filed to merely reflect a change in the readdress, I hereby confirm that the limited liability company has been notified in writing	! further agree to ice of my duties, provided for in egistered office of this change.

FILING FEE: \$25.00

INHS18(10/99)

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