

L97000000480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

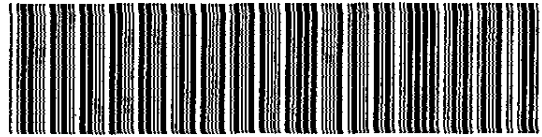
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SEC. CLERK OF DIST. CLERK  
TALLAHASSEE, FLORIDA

**NewCo Corporate Services, Inc.**

875 Avenue of the Americas  
Suite 501  
New York, New York 10001

Telephone: (212) 356-8340

Internet Address: gerri350@aol.com

Fax: (212) 356-8379

*January 9, 2004*

*Florida Secretary of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314*

**RE: Trump International Golf Club, L.C.  
Change of Agent -**

*Dear Sir/Madam:*

*Enclosed please find Certificate of Change of Registered Office/Registered Agent  
on behalf of the above entity.*

*Please file the attached and return a filed-stamped copy to the attention of the undersigned  
at the above address.*

*If there are any problems, please contact the undersigned immediately at the following toll-  
free number 1-888-336-3926.*

*Thanking you in advance for your prompt attention to this matter.*

*Sincerely,*

*Gerri Mirando  
Senior Specialist*

*Encls.*

**CHECK #** 18337 **Amount \$** 25-



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

January 22, 2004

NEWCO CORPORATE SERVICES, INC.  
875 AVENUE OF THE AMERICAS  
STE. 501  
NEW YORK, NY 10001

SUBJECT: TRUMP INTERNATIONAL GOLF CLUB, L.C.  
Ref. Number: L97000000480

We have received your document for TRUMP INTERNATIONAL GOLF CLUB, L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas  
Document Specialist

Letter Number: 104A00003952

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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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: TRUMP INTERNATIONAL GOLF CLUB, L.C.

2. The mailing address of the limited liability company is : MAR - A- LAGO

1100 SOUTH OCEAN BLVD., PALM BEACH, FL 33480

5/5/97

L97000000480

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 records of the Florida Department of State:

VALDES-FAULI CORPORATE SERVICES, INC.

Name

771 South Flagler Drive - Suite 500 East Tower

Address

West Palm Beach, Florida 33401

City, State and Zip

6. The name and address of the new registered agent and/or office:

NRAI Services, Inc.

Name

526 E. Park Avenue

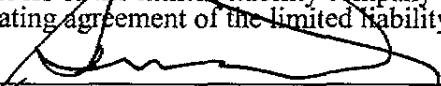
Florida street address (P.O. Box NOT acceptable)

Tallahassee

FL 32301

City, State and Zip

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)

Bernard Diamond, Authorized Person

(Printed or typed name of signee)

*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 confirm that the limited liability company has been notified in writing of this change.*

NRAI Services, Inc.

  
(Signature of Registered Agent)

Geraldine Mirando, Assistant Secretary

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

**FILED**  
04 FEB -5 AM 9:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA