pre-open

2008 LIMITED LIABILITY COMPANY

ANNUAL REPORT FILED **DOCUMENT # M07000003249** Aug 25, 2008 08:00 AM Secretary of State YRG_HOTEL_GROUP_II_L_L_C-Principal Place of Business Mailing Address 6000 SOUTH MEMORIAL PARKWAY 6000 SOUTH MEMORIAL PARKWAY HUNTSVILLE, AL 35802 HUNTSVILLE, AL 35802 07182008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number · 20-5146432 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent A1A REGISTERED AGENT INC. DO NOT WRITE 5647 110TH AVE. NORTH ROYAL PALM BEACH, FL 33411-0000 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable In accordance with \$. 607.193(2)(b), F.S., the limited-FILE NOW!!! FEE IS \$138.75 U00000958303 liability company did not receive the prior notice: Due by September 12, 2008 08/25/08-80003-016 138.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE K. RAO YEDLA HOTEL BUSINESS NAME 6000 SOUTH MEMORIAL PARKWAY STREET ADDRESS CITY-ST-ZIP HUNTSVILLE, AL 35802 MGR SRINATH SERINATH R. YEDLA HOTEL BUSINESS NAME 6000 SOUTH MEMORIAL PARKWAY STREET ADDRESS CITY-ST-ZIP HUNTSVILLE, AL 35802 MGR TITLE SATYA N. YEDLA HOTEL BUSINESS STREET ADDRESS 6000 SOUTH MEMORIAL PARKWAY DO NOT WRITE CITY-ST-ZIP HUNTSVILLE, AL 35802 IN THIS SPACE MGRM TITLE VELEGAPUDI, MOHANA R NAME **6 HICKORY COURT** STREET ADDRESS CITY-ST-ZIP MOLINE, IL 61265 TITLE . NAME STREET ADDRESS CITY-ST-ZIP NAME

11. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS CITY-ST-ZIP

Date

Daytime Phone #