2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Apr 24, 2006 8:00 am Secretary of State DOCUMENT # M97000000811 04-24-2006 90057 020 ****50.00 1. Entity Name AURÓ AUSTRIAN HOTEL, LLC Principal Place of Business Mailing Address TUUJUTY P.O. BOX 8375 880 SOUTH PLEASANTBURG DRIVE SUITE G GREENVILLE, SC 29604 GREENVILLE, SC 29607 3. Mailing Address Principal Place of Business 04182006 Chg-LLC CR2E083 (11/05) 4. FEI Number Applied For 58-2375150 Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CUROTTO, DONALD 105 E. ROBINSON STREET, SUITE 201 ORLANDO, FL 32801 City The above named entity submits this statement for the purpose of changing its registered office or registered ag the obligations of registered agent. nt, or both, in the State of Florida. I am familiar with, and accept Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9 MGRM RAMA, H P MGRM Change TITI F TITLE ☐ Delete ☐ Addition NAME NAME 60 Point Circle STREET ADDRESS STREET ADDRESS Greenville SC 29615 CITY-ST-ZIP GREENVILLE SC 29607 CITY-ST-ZIP MGRM enange TITLE ☐ Delete TITLE ☐ Addition RAMA JP NAME NAME 60 Pointe Circle Greenville SC 291015 880 SOUTH PLEASANTBURG DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GREENVILLE, SC 29607 CITY-ST-ZIP MGRM Delete TITLE TITLE ☐ Addition RAMA, M P NAME NAMÉ 100 Point Circle 880 SOUTH PLEASANTBURG DRIVE STREET ADDRESS STREET ADDRESS GREENVILLE, SC 29607 CITY-ST-ZIP Greenville SC 29615 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Defete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify 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 received or in stee empowered to execute the report as required by Chapter 608, Florida Statutes. SIGNATURE: SIGNATURE AND TYPED OR PRIN

MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIV

FILED

ATTACHMENT

we've moved.

JHM is pleased to announce our new corporate headquarters. We hope you will stop by for a visit soon. Please update your records to reflect our new address.

JHM Hotels **60 Pointe Circle** Greenville, SC 29615

Our phone and fax remain the same: main: 864.232,9944

fax: 864.232.6931



www.jhmhotels.com