File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY & FLORIDA DEPARTMENT OF STATE Sandra B. Mortham ANNUAL REPORT Secretary of State 98 MAR -6 AM 10: 40 1998 **DIVISION OF CORPORATIONS** FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** M97000000854 SAGE HOSPITALITY RESOURCES, LLC 1512 LARIMER STREET, SUITE 800 1512 LARIMER STREET, SUITE 8 DENVER CO 80202 DENVER CO 80202 2. Principal Place of Business 2a. Malling Address 3. Date Organized or Qualified | 3a. State of Formation 12/16/1997 FEI Number DE Sulte, Apt. #, etc. Suite, Apl. #, etc. Applied For City & State City & State Not Applicable 84-1273343 5. Date of Last Report 6. Certificate of Status Desired Ζip Country Country 5ll 75 Additional Fee Beguired 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 <u>300002454703-</u> Suite, Apt. #, etc. -03/12/98--01006--023 ****188.75 ****188.7 ****188.75 City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing Its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE, (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR SAGE DEVELOPMENT RESOU 1512 LARIMER STREET, SUITE DENVER CO

11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. If urther certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an

attachment with an address.