	,	1	B 914	H + - B + 118a	<b>0</b>					
File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.							FILED			
	TY COMPANY	ORIDA DEPARTMENT OF STATE			00 APR 16 PH 5: 00					
ANNUAL REPORT 1999				Secretary of State DIVISION OF CORPORATIONS			SPORETARY OF STATE			
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE										
1. Name and Mailing Address of Limited Liability Company DOCUMENT # M9700000854										
SAGE HOSPITALITY RESOURCES, LLC							1a. Principal Plac	e of Business /	Address	
1512 LARIMER STREET, SUITE 800 DENVER CO 80202							1512 LARIMER STREET, SUITE 8 DENVER CO 80202			
2 Principal Place of Business 2a. Mailin				g Address			3. Date Organized	d or Qualified	3s. State of Formation	
				- <u>-</u>			12/16/19	997	DE	
Suite, Apt. #, etc.			Suite, Apt	pt. #, etc.			4. FEI Number		Applied For	
City & State City			City & Sta	State			84-12733	343	Not Applicable	
Zip	p Country		Zip	Count			5. Date of Last Re	port	6. Certificate of Status Desired	
			<u> </u>		<u> </u>		03/06/19	998	\$8.75 Additional Fee Required	
	e and Address of Current	Agent	.—-	Name	Name and Address	of New Regis	tered Agent/Office			
1200	ATION SYSTEM PINE ISLAND FL 33324	Ì		Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.						
					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 Apent Accepting Appendment) (NOTE Registered Agent signature respired when terms along							DATE			
10. Title	Managing Members/Managers			Business Street Address				City, State and Zip Code		
MGR	SAGE MA	1512 LARIMER STREE SUITE 800			T, SUITE DENVER CO					
	INC.  EDUTION 284845604/23/9901004001 ****188.75 ****188.								9/99~-01004~-001	
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. Hurther 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.  C. HARRIS WHITE, ASST. SEC.										

OF MANAGER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

303-515-7200

Daylor e Prione #

SIGNATURE: