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251 S Atlantic Ave Ormond Beach, FL 32176 (386) 672-8510 Fax (386) 672-7221 800-227-7220

February 23, 2002

900005023189--4 -02/27/02--01025--004 *****35.00 ******35.00

Division of Corporations PO box 6327 Tallahassee, Fl 32314

Gentlemen:

Enclosed is a signed document from Surfside Resort and Suites, Inc. changing the Registered Agent from:

Jo Bursey 1246 Sulten Circle Chuluota, Fl. 32766

to the new Registered Agent:

Mr. William Schmidt American Investment Properties, Inc. 88 NE 5th Ave., Delray Bch., Fl 33483.

Enclosed is a check for \$35.00 for the filing fee.

Sincerely,

Mr. Jay Turner

cc: Bill Smidt

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SECRETARY OF STATE

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STATEMENT OF CHANGE OF REGISTERED AGENT

Pursuant to the provisions of 607.0502, Fla. Stat., the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office and registered agent, in the State of Florida.

1) The name of the corporation is: Surfside Resort and Suites, Inc.

2) The mailing address of the corporation is: 1246 Sultan Circle

Oviedo, FL 32766

3) The date of incorporation is: 9/25/00

4) Document Number: P00000090176

5) The name and address of the current registered agent and office is:

Joe Bursfey 1246 Sulten Circle Chuluota, FL 32766

6) The name and address of the new registered agent and office is:

William Schmidt American Investment Properties, Inc. 88 NE. 5th Avenue Delray Beach, FL 33483 02 FEB 27 PH 3: 19
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its resident agent, as changed, will be identical.

Such change was authorized by an officer so authorized by the Board.

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JAYRTHRAEL PRESIDEN

Printed Name and Title

Having been named as registered agent and to accept service of process for the above-stated corporation, 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 obligation of my position as registered agent.

Signature of Registered Agent
Wilhiam Schmidt

Date

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