P99000089795

Document Number Only

CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 850-222-1092

850-222-1092	Corporation(s) Name	-01/25/0001061007 -01/25/0001061007 *****35.00 *****35.00
A? R Hospitality Grav	p. Erc.	TECON FILE
()Profit ()Nonprofit	()Amendment	()Merger ()Merger
()Foreign ()LLC	()Dissolution	()Mark
()Limited Partnership ()Reinstatement	()Annual Report ()Reservation ()Fictitious Name	()Other ()Ch. RA ()UCC
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Florida Department of State, Jim Smith, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. A&R Hospitality Group, Inc. 1a. The name of the corporation is:--Document number P99000089795 October 7, 1999 1b. Date of incorporation 2. The name and address of the current registered agent and office: William E. Weller, Esq., 101 N. Atlantic Avenue, Cocoa Flroida 32931 3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM c/o C T CORPORATION SYSTEM, 1200 South Pine Island Rd., Plantation, Flortda The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical. Such change was authorized by resolution duly adopted by its board of directors or by an officer/so authorized by the board. Andrew Daniel, President SIGNATURE Typed or printed name and title

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 BY: Solvana Chember (Registered Agent)

DATE /-24-00

BABARA A. BURKE PECIAL ASSISTANT SECRETARY

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91) (FLA. - 2194 - 3/4/92)

1/11/00

DATE

FILING FEE: \$35.00