

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000008655

**Entity Name:** ASSOCIATED LUXURY HOTELS INTERNATIONAL HOLDINGS, LLC**FILED**  
**Apr 22, 2020**  
**Secretary of State**  
**5711188772CC****Current Principal Place of Business:**1 BEACON STREET, 14TH FLOOR  
BOSTON, MA 02108**Current Mailing Address:**1 BEACON STREET, 14TH FLOOR  
BOSTON, MA 02108 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MANAGER  
Name BAUMAN, DANIEL  
Address 6201 N. 24TH PARKWAY  
City-State-Zip: PHOENIX AZ 85016

Title MANAGER  
Name DIEKEMPER, GREG  
Address 6201 N. 24TH PARKWAY  
City-State-Zip: PHOENIX AZ 85016

Title MANAGER  
Name DYER, WILLIAM  
Address 6201 N. 24TH PARKWAY  
City-State-Zip: PHOENIX AZ 85016

Title MANAGER  
Name GABRI, DAVID G.  
Address 1 BEACON STREET, 14TH FLOOR  
City-State-Zip: BOSTON MA 02108

Title MANAGER  
Name LEIMAN, JONATHAN  
Address 6201 N. 24TH PARKWAY  
City-State-Zip: PHOENIX AZ 85016

Title MANAGER  
Name OLSEN, ANDREW  
Address 6201 N. 24TH PARKWAY  
City-State-Zip: PHOENIX AZ 85016

Title VICE PRESIDENT  
Name BAUMAN, DANIEL  
Address 6201 N. 24TH PARKWAY  
City-State-Zip: PHOENIX AZ 85016

Title CHIEF FINANCIAL OFFICER  
Name MERRYWEATHER, HUGH  
Address 6201 N. 24TH PARKWAY  
City-State-Zip: PHOENIX AZ 85016

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: DANIEL BAUMAN****MANAGER****04/22/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title	CHIEF EXECUTIVE OFFICER
Name	DOMINGUEZ, MICHAEL
Address	1 BEACON STREET, 14TH FLOOR
City-State-Zip:	BOSTON MA 02108