

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000072077

**Entity Name:** ES HOSPITALITY, LLC

**Current Principal Place of Business:**

2315 NW 107TH AVENUE  
SUITE 1M-09  
DORAL, FL 33172

**FILED**  
**Apr 29, 2016**  
**Secretary of State**  
**CC5753523084**

**Current Mailing Address:**

550 BILTMORE WAY  
SUITE 200  
CORAL GABLES, FL 33134 US

**FEI Number: 26-0513123**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CMS INTERNATIONAL ENTERPRISES, INC  
550 BILTMORE WAY  
SUITE 200  
CORAL GABLES, FL 33134 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: CARLOS SAMLUT**

**04/29/2016**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name OLIVARES, EDGAR J  
Address 2315 NW 107TH AVENUE  
SUITE 1M-09  
City-State-Zip: DORAL FL 33172

Title MGR  
Name WULFF, MAX WILLIAM  
Address 2315 NW 107TH AVENUE  
SUITE 1M-09  
City-State-Zip: DORAL FL 33172

*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: EDGAR JOSE OLIVARES**

**MANAGER**

**04/29/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date