

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000101521

**Entity Name:** UH-SI, LLC

**Current Principal Place of Business:**

6710A ROCKLEDGE DRIVE, SUITE 420  
BETHESDA, MD 20817

**Current Mailing Address:**

6710A ROCKLEDGE DRIVE, SUITE 420  
BETHESDA, MD 20817 US

**FEI Number:** 27-1193113

**Certificate of Status Desired:** Yes

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 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 MGR  
Name DJU HOTELS SI, LLC  
Address 6710A ROCKLEDGE DRIVE, SUITE 420  
  
City-State-Zip: BETHESDA MD 20817

*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:** PHIL DANIEL

SVP, MANAGER

04/07/2015

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date