

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000085416

Entity Name: NOLEHOTEL, LLC**Current Principal Place of Business:**1212 SE 17TH AVE.
OCALA, FL 34471**Current Mailing Address:**1212 SE 17TH AVE.
OCALA, FL 34471 US**FEI Number:** 47-3155116**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEPHENS, MONROE S JR.
1212 SE 17TH AVE.
OCALA, FL 34471 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	STEPHENS, MONROE S JR.
Address	1212 SE 17TH AVE.
City-State-Zip:	OCALA FL 34471

Title	AUTHORIZED MEMBER
Name	SEXTON, PAUL
Address	7512 DR. PHILLIPS BLVD SUITE 50904
City-State-Zip:	ORLANDO FL 32819

Title	AUTHORIZED MEMBER
Name	GOSLIN, CHRISTOPHER
Address	337 S. PLANT AVE.
City-State-Zip:	TAMPA FL 33606

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: MONROE SCOTT STEPHENS

MANAGER

07/27/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date