

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000142113

Entity Name: PELTA UCF OPCO LLC

Current Principal Place of Business:

C/O KEY PERFORMANCE HOSPITALITY MANAGEMENT
114 W. 1ST STREET, SUITE 218
SANFORD, FL 32771

Current Mailing Address:

C/O KEY PERFORMANCE HOSPITALITY MANAGEMENT
114 W. 1ST STREET, SUITE 218
SANFORD, FL 32771 US

FEI Number: 81-3444201

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
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 | Title | AUTHORIZED REPRESENTATIVE |
| Name | PELTA UCF HOLDCO LLC | Name | ANTONIK, TROY |
| Address | 114 W. 1ST STREET, SUITE 218 | Address | C/O KEY PERFORMANCE HOSPITALITY MANAGEMENT 114 W. 1ST STREET, SUITE 218 |
| City-State-Zip: | SANFORD FL 32771 | City-State-Zip: | SANFORD FL 32771 |

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: TROY ANTONIK

**AUTHORIZED
REPRESENTATIVE**

03/13/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date