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: INAKI J. GONZALEZ ARNEJO

Electronic Signature of Signing Authorized Person(s) Detail

### Name and Address of Current Registered Agent:

PENA, JOSE 6834 LAKESIDE CIR. S DAVIE, FL 33314 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	: JOSE PENA	10/08/2020			
	Electronic Signature of Registered Agent		Date		
Authorized Person(s) Detail :					
Title	MGR	Title	MGR		
Name	GONZALEZ ARNEJO, INAKI J	Name	NAVARRO ITHURALDE, ARTURO M		
Address	1111 KANE CONCOURSE	Address	1111 KANE CONCOURSE		
City-State-Zip:	BAY HARBOR ISLAND FL 33009	City-State-Zip:	BAY HARBOR ISLAND FL 33009		

DOCUMENT# L18000129120 Entity Name: DOT HOTELS, LLC

# **Current Principal Place of Business:**

6834 LAKESIDE CIR. S DAVIE, FL 33314

## **Current Mailing Address:**

6834 LAKESIDE CIR. S DAVIE. FL 33314 US

## FEI Number: 61-1890212

2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED Oct 08, 2020 Secretary of State 0873036076CC

Certificate of Status Desired: No

Date

10/08/2020

MGR