

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000000846

Entity Name: FELCOR/CMB ORSOUTH HOTEL, L.L.C.

FILED
Apr 28, 2022
Secretary of State
1574876736CC

Current Principal Place of Business:

C/O RLJ LODGING TRUST
3 BETHESDA METRO CENTER, SUITE 1000
BETHESDA, MD 20814

Current Mailing Address:

C/O RLJ LODGING TRUST
3 BETHESDA METRO CENTER, SUITE 1000
BETHESDA, MD 20814 US

FEI Number: 75-2874749

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.,
STE 4
TALLAHASSEE, FL 32301 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: MANAGING MEMBER
Name: FELCOR LODGING LIMITED PARTNERSHIP
Address: C/O RLJ LODGING TRUST
3 BETHESDA METRO CENTER, SUITE 1000
City-State-Zip: BETHESDA MD 20814

Title: PRESIDENT AND TREASURER
Name: HALE, LESLIE D.
Address: C/O RLJ LODGING TRUST
3 BETHESDA METRO CENTER, SUITE 1000
City-State-Zip: BETHESDA MD 20814

Title: VICE PRESIDENT
Name: MAHONEY, SEAN M.
Address: C/O RLJ LODGING TRUST
3 BETHESDA METRO CENTER, SUITE 1000
City-State-Zip: BETHESDA MD 20814

Title: VICE PRESIDENT
Name: BARDENETT, THOMAS
Address: C/O RLJ LODGING TRUST
3 BETHESDA METRO CENTER, SUITE 1000
City-State-Zip: BETHESDA MD 20814

Title: VICE PRESIDENT
Name: AMOS, CRAIG
Address: C/O RLJ LODGING TRUST
3 BETHESDA METRO CENTER, SUITE 1000
City-State-Zip: BETHESDA MD 20814

Title: VICE PRESIDENT
Name: TURNER, NICOLE
Address: C/O RLJ LODGING TRUST
3 BETHESDA METRO CENTER, SUITE 1000
City-State-Zip: BETHESDA MD 20814

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: SEAN M. MAHONEY

VICE PRESIDENT

04/28/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date