

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000002008

Entity Name: CENTEX HOSPITALITY GROUP, LLC

Current Principal Place of Business:

3350 PEACHTREE ROAD NE
SUITE 150
ATLANTA , GA 30326

FILED
May 01, 2017
Secretary of State
CC6695538120

Current Mailing Address:

3350 PEACHTREE ROAD NE
SUITE 150
ATLANTA , GA 30326 US

FEI Number: 20-2057788

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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: MICHELE L. ABBOTT

05/01/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	VICE PRESIDENT AND TREASURER	Title	MANAGER AND VICE PRESIDENT
Name	LANGEN, D. BRYCE	Name	HILL, KIMBERLY M
Address	3350 PEACHTREE ROAD NE SUITE 150	Address	3350 PEACHTREE ROAD NE SUITE 150
City-State-Zip:	ATLANTA GA 30326	City-State-Zip:	ATLANTA GA 30326
Title	PRESIDENT	Title	SECRETARY
Name	OSSOWSKI, JAMES L	Name	MATUREN, ELLEN PADESKY
Address	3350 PEACHTREE ROAD NE SUITE 150	Address	3350 PEACHTREE ROAD NE SUITE 150
City-State-Zip:	ATLANTA GA 30326	City-State-Zip:	ATLANTA GA 30326
Title	VICE PRESIDENT & ASSISTANT SECRETARY	Title	ASSISTANT SECRETARY
Name	CLEMENTS, SCOTT M.	Name	CONLON, KELLYMARIE M.
Address	3350 PEACHTREE ROAD NE SUITE 150	Address	3350 PEACHTREE ROAD NE SUITE 150
City-State-Zip:	ATLANTA GA 30326	City-State-Zip:	ATLANTA GA 30326

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: KELLYMARIE M CONLON

ASSISTANT SECRETARY 05/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date