

**2020 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# M1300006425

**Entity Name:** RLJ CABANA MIAMI BEACH, LLC

**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:** 32-0415562

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK, INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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	MEMBER	Title	PRESIDENT AND TREASURER
Name	RLJ LODGING TRUST, L.P.	Name	HALE, LESLIE D.
Address	C/O RLJ LODGING TRUST 3 BETHESDA METRO CENTER SUITE 1000	Address	C/O RLJ LODGING TRUST 3 BETHESDA METRO CENTER SUITE 1000
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814
Title	VP	Title	VP
Name	MAHONEY , SEAN M.	Name	AMOS, CRAIG
Address	C/O RLJ LODGING TRUST 3 BETHESDA METRO CENTER SUITE 1000	Address	C/O RLJ LODGING TRUST 3 BETHESDA METRO CENTER SUITE 1000
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814
Title	VP	Title	VP
Name	BARDENETT , THOMAS	Name	TURNER, NICOLE
Address	C/O RLJ LODGING TRUST 3 BETHESDA METRO CENTER SUITE 1000	Address	C/O RLJ LODGING TRUST 3 BETHESDA METRO CENTER SUITE 1000
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814
Title	VICE PRESIDENT AND SECRETARY		
Name	MCKALIP , FREDERICK D.		
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:** FREDERICK D. MCKALIP

04/29/2020

SECRETARY, BY JULIE  
PHILLIPS, ATTORNEY-IN-  
FACT

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Electronic Signature of Signing Authorized Person(s) Detail

Date