2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000004283

Entity Name: RLJ III - EM WEST PALM BEACH, INC.

Apr 27, 2020 **Secretary of State** 4477375519CC

FILED

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: 27-3084116 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

Electronic Signature of 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:

Officer/Director Detail:

Title PRESIDENT, TREASURER & Title VICE PRESIDENT AND SECRETARY

> DIRECTOR MCKALIP, FREDERICK D Name

HALE, LESLIE D. Name Address C/O RLJ LODGING TRUST

Address C/O RLJ LODGING TRUST 3 BETHESDA METRO CENTER SUITE

3 BETHESDA METRO CENTER SUITE

City-State-Zip: BETHESDA MD 20814

City-State-Zip: BETHESDA MD 20814

Title VΡ Name AMOS, CRAIG

Name MAHONEY, SEAN M. Address C/O RLJ LODGING TRUST

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

1000

City-State-Zip: BETHESDA MD 20814 BETHESDA MD 20814 City-State-Zip:

Title VΡ

Title VΡ TURNER, NICOLE Name

BARDENETT, THOMAS Name Address C/O RLJ LODGING TRUST

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

3 BETHESDA METRO CENTER, SUITE 1000

Title

VΡ

City-State-Zip:

BETHESDA MD 20814 City-State-Zip: BETHESDA MD 20814

Title

Address

Address

DIRECTOR

Name JOHNSON, ROBERT L.

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FREDERICK D. MCKALIP

04/27/2020

Date

SECRETARY, BY JULIE PHILLIPS, ATTORNEY-IN-FACT

Electronic Signature of Signing Officer/Director Detail

Date