A22973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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10/24/13--01019--004 **25.00
10/7/13-01037-007 10.00

2013 OCT 24 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

OCT 25 2013

CORPORATION SERVICE COMPANY

CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: October 3, 2013

Order#: 823841-171

Re: MOTEL 6 OPERATING LP

Enclosed please find:

XX Change of Registered Agent and Office.
XX Check in the amount of $10.00. X 25.00

Please take the following action:

XX File in your office on a routine basis.
XX Issue Proof of Filing.
XX Please return evidence to the following:

Attn: Evelyn Wright
c/o Corporation Service Company
2711 Centerville Road, Suite 400
Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

2013 OCT 24 AM 11:48

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. MOTEL 6 OPERATING L.P.
Name of Limited Partnership or Limited Liability Limited Partnership

2. 07/24/1986
Date of filing/registration in Florida

3. A22973
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System
Name

1200 South Pine Island Road
Address

Plantation, FL 33324
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Corporation Service Company
Name

1201 Hays Street
Florida street address (P.O. Box not acceptable)

Tallahassee FL 32301
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Signature of General Partner Dona Priebe, Authorized Person on behalf of G6 Hospitality LLC, its general partner

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.

Corporation Service Company

By: Grace E. Kirby

Signature of Registered Agent Grace E. Kirby, Assistant VP

2013 OCT 24 AM 11:46

Filing Fee: $35.00
Certified Copy (optional): $52.50

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Corporation Service Company

By: Grace E. Kirby

Signature of Registered Agent Grace E. Kirby, Assistant VP

Filing Fee: $35.00
Certified Copy (optional): $52.50

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