1. Entity Nam	MENT # OY HOTELS, LTD.	A9700	0000891			SECRETARY OF STATE DIVISION OF CORPORATIONS
Principal Place of Business Mailing Address 401 EAST CHASE STREET, SUITE 105 P.O. BOX 940 PENSACOLA FL 32501 GULF BREEZE FL 32562-09				-0940		00 MAY - 1 PM 1: 33
2. Principal P	lace of Business	r St.	3. Mailing Address			
			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE
Pensacola FL			City & State			4. FEI Number S9-3476836 Applied For Not Applicable
^{zip} 323	SO] Coun	1877-	Zip	Cour	ıtry	5. Certificate of Status Desired
BRANNEN, DAVID A -401-EAST-CHASE STREET, SUITE 105 /7 W- Cedar St. PENSACOLA FL 32501 Saites					Street Ac	7. Name and Address of New Registered Agent Iddress (P.O. Box Number is Not Acceptable) Zip Code
8. The above	named entity submit	s this statement for	r the purpose of changing it	s register		registered agent, or both, in the State of Florida.
SIGNATURE .	Signature, typed or printed i		and title if applicable. (NO 10. Amount of Capi	TE: Registere	ed Agent signatu	re required when reinstating) DATE 11. MAKE CHECK PAYABLE TO DEPT. OF STATE
as Shown o	A GENER	AL PARTNER T	in FLORIDA to a	M YTITY	UST BE F	SEE REVERSE SIDE FOR FEE INFORMATION REGISTERED AND ACTIVE WITH THIS OFFICE.
12.		ENERAL PARTNER		13.		ADDRESS CHANGES ONLY
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	P9700028546 BRANNEN HOLDINGS OF PEABODY, INC. 401 EAST CHASE STREET, SUITE 105 PENSACOLA FL 32501				REET ADORESS Y-ST-ZIP	POBOX940 Gulf Breeze FL 30562
DOCUMENT # NAME STREET ADDRESS	P97000028543 LEATHERWOOD PROPERTIES OF PEABODY, INC.			STR	REET ADDRESS	741 Bragg H:11 Rd.
CITY-ST-ZIP				CITY	Y-ST-ZIP	Norwich, UT OSOSS
DOCUMENT#	· 、 -	•	- , ·- **	STR	REET ADORESS	· · · · · · · · · · · · · · · · · · ·
STREET ADDRESS CITY - ST - ZIP				Crty	Y-ST-ZIP	
DOCUMENT# NAME				STR	REET ADDRESS	<u>5000032843653</u> -06/12/0001021018
STREET ADDRESS CITY - ST - ZIP		<u></u>		СПҮ	Y-ST-ZIP	****\$26.25 ****\$26.25
DOCUMENT# NAME				STR	REET ADDRESS	
STREET ADDRESS CITY-ST-ZIP				CITY	Y-ST-ZIP	
				STR	REET ADDRESS	
NAME Stræet address				CITY	Y-ST-ZIP	
indicated	on this report is true	and accurate and	this filing does not qualify for that my signature shall haves s report as required by Chap	or the exe	emption state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information that I am a General Partner of the limited partnership or tres