



FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORRECTED
Please Allow For
Same File Date

March 28, 2022

CT

SUBJECT: MARSHALL HOTELS, INC.
Ref. Number: F00000006680

We have received your document for MARSHALL HOTELS, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

As of January 1, 2020, the form for amending a Foreign Profit Corporation has changed. Please use the new Amended Application for a Foreign Profit Corporation form located on our website (www.sunbiz.org).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder
Regulatory Specialist III

Letter Number: 222A00007176

RECEIVED
2022 MAR 29 AM 11:42
TALLAHASSEE, FLORIDA

CT CORP
3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 03/29/2022
Acc#I20160000072

en: c DW

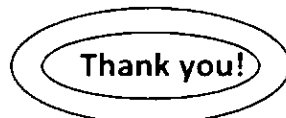
Name:	Marshall Hotels & Resorts, Inc.
Document #:	
Order #:	14212711

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 43.75



PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F00000006680

(Document number of corporation (if known))

1. Marshall Hotels, Inc.
(Name of corporation as it appears on the records of the Department of State)
2. Maryland 3. 12/01/2000
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____
5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) _____

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

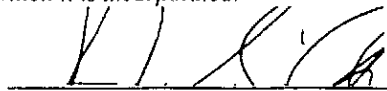
Signature of New Registered Agent, if changing

2022 MAR 25 AM 10:37
MAR 25 2022
10:37 AM

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Sec/COO <input checked="" type="checkbox"/>	Elizabeth A. Procaccianti	1140 Reservoir Ave. Cranston, RI 02920	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Director	Elizabeth A. Procaccianti	1140 Reservoir Ave. Cranston, RI 02920	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Director	James A. Procaccianti	1140 Reservoir Ave. Cranston, RI 02920	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Treasurer <input checked="" type="checkbox"/>	Gregory D. Vickowski	1140 Reservoir Ave. Cranston, RI 02920	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Elizabeth A. Procaccianti

(Typed or printed name of person signing)

Secretary

(Title of person signing)

2 MAR 25 4:10:27 PM '07

FILING FEE \$35.00