F16000003801

| (Reque | stor's Name) | | | |
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| (Addres | is) | | | |
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| (City/St | ate/Zip/Phone #) | | | |
| PICK-UP | WAIT MAIL | | | |
| (Business Entity Name) | | | | |
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LLIARASSEE, FL

2021 NOV 12 AH 11: 50

Y SULKER NOV 15 2021 CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbaggeo EL 22201

CONTACT PERSON: Alexxis Weiland

Tallhassee, FL 32301 Phone: 850-558-1500

| | ACCOUNT NO. | : | I2000000195 |
|---------------|------------------|------|-----------------|
| | REFERENCE | : | 204135 8046367 |
| | AUTHORIZATION | : | Spell de man |
| | COST LIMIT | : | \$ 35.00 |
| ORDER DATE : | November 5, 2021 | | |
| ORDER TIME : | 1:35 PM | | |
| ORDER NO. : | 204135-025 | | |
| CUSTOMER NO: | 8046367 | | |
| | • | | · |
| | CHANGE OF A | GEN' | <u>VT</u> |
| | | | |
| NAME: | RED LION HOTE | LS (| CORPORATION |
| | | | |
| | | | |
| PLEASE RETURN | THE FOLLOWING AS | PRO | ROOF OF FILING: |
| CERTIF | FIED COPY | | |
| XX PLAIN | | | |
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EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| | | 02, 617,0502, 607,1508, or 617,1508, Florida Statutes, this attion organized under the laws of the State of WA | |
|---|---|--|--|
| | | ve or registered agent, or both, in the State of Florida. | |
| 1. The name of | the corporation: RED LION H | OTELS CORPORATION | |
| 2. The principal office address: 255 Washington Street, Suite 230, Newton, MA 02458 | | | |
| 3. The mailing | address (if different): | | |
| 4. Date of incor | rporation/qualification: 08/24/2 | 2016 Document number: F16000003801 | |
| | d street address of the current in interest address of the current in interest address of the current in interest address of the current | registered agent and registered office on file with the inter resigned) | |
| | CORPORATE CREATIONS | S NETWORK, INC. | |
| | 801 US HIGHWAY 1 | | |
| | NORTH PALM BEACH, FL | 33408 | |
| 6. The name an (if changed): | d street address of the new reg | istered agent (if changed) and /or registered office | |
| | Corporation Service Compa | iny Etg. 75 T | |
| | 1201 Hays Street | 360 F | |
| | | PO Box NOT acceptable 57.00 | |
| | Tallahassee | FL 32301 77 = = | |
| The street address changed will | ess of its registered office and the identical. | the street address of the business office of its registered agent. | |
| Such change wa authorized by the | as authorized by resolution de he board, or the corporation h | ily adopted by its board of directors or by an officer so as been notified in writing of the change. | |
| S | 10 Mus | Stephen Miano - Treasurer | |
| Signatu | ue of an officer or director | Printed or typed name and title | |
| I further agree of my duties, an document is her corporation has Corporation | to comply with the provisions ad I am familiar with and acceing filed merely to reflect a chis been notified in writing of the Service Company | | |
| | sea t-Kuby | 11/05/2021 | |
| Sig | mature of Registered Agent | Date | |
| If signing on be | chalf of an entity: | | |
| | Asst. Vice President | | |
| t' | and a thomas I Many | | |

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)