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A KIMPTON HOTEL

To:

Gary Blankenbaker

Document Specialist

Division of Corporations

RE:

Document number L04000083654

Letter number: 916A00016322

Mr. Blankenbaker,

Please find enclosed two checks. The first check is for \$25.00 and is for the name change of the Registered Agent for VERO HOTEL MANAGEMENT, LLC. Also find a check for \$100.00 for reinstatement of the dissolution of a limited liability company for VERO HOTEL MANAGEMENT, LLC

If you need any further information, please contact me directly

Thanks for all of your help and service.

Larry Murphy

Director of Finance

Vero Beach Hotel and Spa

3500 Ocean Drive

Vero Beach, FL 32963

772-231-5666 main switch ext. 6001

772-469-1061 direct line.

Vero Beach FL 32963 772.231.5666 phone 772.234.4866 fax

verobeachhotelandspa.com

3500 Ocean Drive

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: VERO HOTEL MANAGEM	IENT, LLC		
	me of Limited	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Of	ffice Change an	d fee(s) are submitted for filing.	
Please return all correspondence concerning t	his matter to the	e following:	
George W. Heaton			
Name of Person		100 va 144	
Firm/Company			
214 33rd Street			Ξ
Address		- Control of the Cont	All Artistant
West Palm Beach, FL, 33407			3
City/State and Zip Code		******	į ,
george@heatoncompanies.com			4 1 1 1 1 1
E-mail address: (to be used for future and	nual report noti	fication)	3
For further information concerning this matter	, please cail:		
Kristinia Matas	at (833-5500	
Name of Person		Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Ta	Illahassee, Florida 32314	
Enclosed is a check for the following	; amount;		
3 \$25 Filing Fee	<u> </u>	55 Filing Fee & Certified Copy	
INHS18 (2/14)			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compuny submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	lame of the limited liability company: VERO HOT	EL MANAGEME	NT, LLC		
2. (a)	277 Royal Poinciana Way	(b) 277 R	(b) 277 Royal Poinciana Way		
• • •	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability of Note: MAY BE POST OFFICE		
	Suite 156	Suite 1		עאטע	
	Palm Beach, FL 33480	Palm E	leach, FL 33480		
	11/16/2004	L04000	083654	: J 14	
3.	Date of filing/registration in Florida	4.	Document number	\$	
5. (a)	Alan I. Armour II				
	Registered Agent and Registered Office shown on the records of 1645 Palm Beach Lakes Blvd		nte:) ************************************	
	Registered Office Address (MUST RE FLORIDA STREET) Suite 1200	ADOKESSI		į	
		33401	- 58		
(b)	George W. Heaton Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 214 33rd Street <u>NEW Registered Office Address:</u>	d Office andress:		(1)	
	West Palm Beach	33407	-		
the char agent w was/we the artic	mited liability company is not organized under the law nge or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members of the operating agreement of the une of a member or authorized representative of a member	the registered offic ability company, it is of the limited liabilit limited liability cor George W. H	e and the business office of the shereby confirmed that the chay company or as otherwise propany. leaton Printed or typed name of signes	registéred ange(s) vided in	
_L	y accept the appointment as registered agent and agroups of all statutes relative to the proper and complete gations of my position as registered agent as provided by effect a change in the registered office uddress. It is writing of this change.	ce to act in this cap performance of my d for in Chapter 60: hereby confirm that	ucity. I further agree to compl duties, and I am familiar with a , F.S. Or, if this document is b the limited Itability company ha	v with the ind actept eing fled us been	
	Division of Corporations a P.O. F	Ray 6377a Tallahas	ena Eš 3121.(}	

Division of Corporations o P.O. Box 6327 Taliahassee, FL 32314 FILING FEE: \$25.00

INHS18 (2/14)