

L05000060290

(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:

A. LUNT

DEC - 8 2009

EXAMINER

Office Use Only



800162136158

12/07/09--01029--004 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 DEC - 7 PM 3:40

FILED

JACK M. MAAG, PARALEGAL
941.364.2728
jmaag@slk-law.com

December 3, 2009

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Sarasota Hotels, L.L.C.
File No. B00293-130925

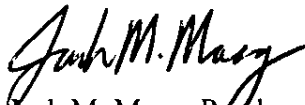
FILED
2009 DEC -7 PM 3:40
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

To Whom It May Concern:

Enclosed herewith please find an original Statement of Change of Registered Agent for the referenced Limited Liability Company, together with a check in the amount of \$25.00 to cover the filing fee.

Please return the date stamped copy of the filing to the undersigned in the enclosed envelope.

Very truly yours,


Jack M. Maag, Paralegal

JMM

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Sarasota Hotels, L.L.C.

2. (a) Principal office address of limited liability company: 5774 Clark Road

☐ (Note: **MUST BE STREET ADDRESS**) Sarasota, FL 34233

(b) Mailing address of limited liability company: 5778 Clark Road

☐ (Note: **MAY BE POST OFFICE BOX**) Sarasota, FL 34233

06/17/2005
3. Date of filing/registration in Florida

L05000060290
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Paul K. Bachman

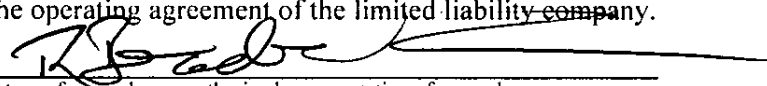
Registered Office Address: 240 S. Pineapple Ave., 10th Floor
Sarasota, FL 34236

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Jenifer S. Schembri

NEW Registered Office Address: 240 S. Pineapple Ave., 10th Floor
(MUST BE FLORIDA STREET ADDRESS) Sarasota, FL 34236

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


Signature of a member or authorized representative of a member

Richard Bradshaw
Printed or typed name of signee

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 and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. If this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


Signature of Registered Agent

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