	<b>ه</b>
L0500	0114865
(Requestor's Name) (Address)	500378618335
(Address) (City/State/Zip/Phone #)	500576010555
Business Entity Name)	
(Document Number) Certified Copies Certificates of Status	REC 2022 JAN
Special Instructions to Filing Officer:	OEIVED
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	y -, ULKER JA: 18 2072

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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			ACCOUNT 1	NO. :	:	I2000000195	
			REFEREI	NCE :	:	377253	7184610
			AUTHORIZAT		D	The	
			COST LIN			<b>elle le ma</b> \$ 25.00	
ORDER	DATE	:	January 13, 2	2022			
ORDER	TIME	:	4:50 PM				
ORDER	NO.	:	377253-005				

17 J N

CUSTOMER NO: 7184610

## CHANGE OF AGENT

NAME: HAWAIIAN COURT HOSPITALITY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

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

. N

Pursuant to the provisions of sections 605.0114 or 605.0116. 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.

١.	Na	me of the limited liability company:	JRT HO	SPITALITY,				
2. (	(a)	Quality Suites	0	(b) 18 W OLIVE ST				
	,	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )		/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)			
		8200 Palm Parkway						
		ORLANDO, FL 32836	_	WESTVIL	LE, NJ 08093			
		11/30/2005		L05000114	865			
3.		Date of filing/registration in Florida	- 4.		Document number			
5.	(a)	CT CORPORATION SYSTEM						
	()	Registered Agent and Registered Office shown on the records of t 1200 SOUTH PINE ISLAND ROAD	a Dept. of State	11				
		Registered Office Address (MUST BE FLORIDA STREET A	<u>S)</u>					
		PLANTATION FL	33324		- ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			
(	(b)	Corporation Service Company						
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ldress:					
		1201 Hays Street						
		<u>NEW</u> Registered Office Address:						
		Tallahassee FL	32301					
chai agei was	nge nt w /we	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	registere bility co f the lim	ed office and impany, it is iited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in			
		Xie & CiOnii	Jill (	Cilmi, Author	rized Person			
	-	ure of a member or authorized representative of a member			Printed or typed name of signee			
prov the s to m	visic obli iere	in accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address. I he lin writing of this change.	e to act performa for in C ereby co	in this capa ance of my d Thapter 605, onfirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been			

vace C? SON, Signature of Registered Agent

Grace E. Kirby, Asst. Vice President, on behalf of Corporation Service Company Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314

INHS18 (2/14)

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FILING FEE: \$25.00