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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*[Handwritten signature]*  
8/21/17

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** TPG of Florida, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luis A. Plasencia

\_\_\_\_\_  
Name of Person

The Plasencia Group, Inc.

\_\_\_\_\_  
Firm/Company

1 N. Dale Mabry Hwy. #1000

\_\_\_\_\_  
Address

Tampa, FL 33609

\_\_\_\_\_  
City/State and Zip Code

oplasencia@tpghotels.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Orlando Plasencia

813 9321234

at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## TPG of Florida, LLC

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Dennis Reed	1 N. Dale Mabry Hwy. #1000	<input type="checkbox"/> Add
		Tampa, FL 33609	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Christopher R. Plasencia	1 N. Dale Mabry Hwy. #1000	<input checked="" type="checkbox"/> Add
		Tampa, FL 33609	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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TALLAHASSEE, FLORIDA

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated August 17 2017

Forbear

Signature of a member or authorized representative of a member

Luis A. Plasencia

Typed or printed name of signee