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(Requ	estor's Nam	e)
(Addre	ess)	
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(City/s	State/Zip/Pho	one #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificat	tes of Status
Special Instructions to Eil	· - · · · · · · · · · · · · · · · · · ·	

L. SELLERS

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EXAMINER

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COVER LETTER

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TO: Registration Section Division of Corporations		
SUBJECT: Home Inn, LLC (Name	e of Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.	
Please return all correspondence concernir	ng this matter to the following:	
LAURENT BENSOUSSAN		
(Name of Person)		
Home Inn, LLC (Firm/Company)		
1741 Alton Road (Address)		
Miami Beach, FL 33139 (City/State and Zip Code)		
For further information concerning this ma	atter, please call:	
LAURENT BENSOUSSAN	at (<u>305</u>) <u>773-4001</u>	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the follow	ving amount:	
✓ \$25 Filing Fee		

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: Home	Inn, LLC
2. (a) Principal office address of limited liability co (<i>Note: MUST BE STREET ADDRESS</i>)	ompany: 1741 Alton Road Miami Beach, FL 33139
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1741 Alton Road Miami Beach, FL 33139
10/19/2007	L07000106396
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	wn on the records of the Florida Dept. of State:
Registered Agent:	LAURENT BENSOUSSAN
Registered Office Address:	5941 SW 116th Street Coral Gables, FL 33156
(b) Enter name of NEW Registered Agent and/o	or NEW Registered Office address:
NEW Registered Agent:	LAURENT BENSOUSSAN
NEW Registered Office Address:	1741 Alton Road
MUST BE FLORIDA STREET ADDRESS	Miami Beach ,FL_33139
that after the change or changes are made, the Florid	er the laws of the State of Florida, it is hereby confirmed la street address of the registered office and the business in the case of a Florida limited liability company, it is crized by an affirmative vote of the members of the limited cicles of organization or the operating agreement of the
(Printed or typed name of signee)	
	t and agree to act in this capacity. I further agree to the proper and complete performance of my duties, and I osition as registered agent as provided for in Chapter 608, lect a change in the registered office address, I hereby notified in writing of this change.
(Signature of Registered Agent)	
<u> </u>	O. Box 6327, Tallahassee, FL 32314