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COVER LETTER

TO: Registration Section Division of Corporations			
Hotel Chelsea South Beach SUBJECT:	LLC		
Nam	ne of Limited	Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	ice Change a	nd fee(s) are submitted for filing	ng.
Please return all correspondence concerning th	is matter to the	he following:	
Joshua M. Entin, Esq			
Name of Person	-, <i></i>		
Entin & della Fera, P.A.			
Firm/Company	·		
633 S. Andrew Ave. Suite 500			2015 SLC: TALLA
Address			≦商 3
Ft. Laudedale, Fl 33301			ASSECTE ARRYSTE
City/State and Zip Code	11.0	· ···	
raul.frontal@southbeachgroup.com			05 05
E-mail address: (to be used for future ann	nual report no	otification)	
For further information concerning this matter	, please call:		
Raul Frontal	305	609-6700	
Name of Person	ar (Area Code & Daytime To	elephone 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 following	g amount:		
□ \$25 Filing Fee	□ \$25 Filing Fee □ \$55		ору

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 company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

1. Na	me of the limited liability company: Hotel Chelse	ea South E	Beach LLC
2. (a)	944 Washington Ave	(b)	808 Collins Ave
z. (<u>)</u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0).	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
•	Miami Beach, FI 33139		Miami Beach, FI 33139
	03/31/2008		
•			_08000032826
3.	Date of filing/registration in Florida Entin, Joshua M. Esq	4.	Document number
	Registered Agent and Registered Office shown on the records of 110 S.E. 6th Street Registered Office Address (MUST BE FLORIDA STREET) Suite 1970		
		33301	
(b)	Entin, Joshua M. Esq		7AL SE
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	ed Office addr	ress: AHA 35
	633 S. Andrews Ave.		HASSE I
	NEW Registered Office Address:		
	Suite 500		
	Ft. Lauderdale, F	L_33301	<u>□</u> 0 S
the changent was/weather the arti	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members icles of organization or the operating agreement of the ture of a member or authorized representative of a member	of the registe liability con of the limit to limited lia	tered office and the business office of the registere impany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
I here provisi the obi	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, and in writing of this change.	gree to act i le performan led for in Ch I hereby cor	in this capacity. I further agree to comply with the ence of my duties, and I am familiar with and acce hapter 605, F.S. Or, if this document is being file enfirm that the limited liability company has been

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

Signature of Registered Agent