## 109000091903

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**EXAMINER** 



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DIVISION OF CORPORATIONS

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ACCOUNT NO.	: I2000000195	Oly Se
REFERENCE	: 783198 7586533	14
AUTHORIZATION	: Spullelenan	73 6
COST LIMIT	$H \setminus H$	TAMA 27 PAID:
ORDER DATE : May 19, 2011		وي
ORDER TIME : 9:27 AM		
ORDER NO. : 783198-049		
CUSTOMER NO: 7586533		
<u>CHANGE OF A</u>	<u>AGENT</u>	
NAME: PALMETTO HOSP CITY, LLC	PITALITY OF YBOR	
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:	
CERTIFIED COPY  XXX PLAIN STAMPED COPY		
CONTACT PERSON: Matthew Young		
	EXAMINER:	

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## 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:	PALMETTO HOSPITALITY OF YBOR CITY, LLC
2. (a) Principal office address of limited I (Note: MUST BE STREET ADD	RESS) Ste 300
	Spartanburg, SC 29302
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	company: 340 East Main Street  BOX) Ste 300  Spartanburg, SC 29302
	Spartanburg, SC 29302
09/23/2009	L09000091903
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered C	ffice shown on the records of the Florida Dept. of State:
Registered Agent:	C T Corporation System
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324
(b) Enter name of <u>NEW Registered As</u>	ent and/or NEW Registered Office address:
<b>NEW</b> Registered Agent:	Corporation Service Company
NEW Registered Office Address:	1201 Hays Street
(MUST BE FLORIDA STREET A	Tallahassee ,FL 32301
that after the change or changes are made, to office of the registered agent will be identicated.	ized under the laws of the State of Florida, it is hereby confirmed the Florida street address of the registered office and the business al. Or, in the case of a Florida limited liability company, it is ere authorized by an affirmative vote of the members of the limited in the articles of organization or the operating agreement of the
Maureen Cathell, Authorized Person	<del></del>
(Printed or typed name of signee)  I hereby accept the appointment as registe comply with the provisions of all statutes ream familiar with and accept the obligation. F.S. Or, if this document is being filed to neconfirm that the limited liability company hereby:  (Signature of Degistered Agent) Elizabeth A. Dawson.	red agent and agree to act in this capacity. I further agree to lative to the proper and complete performance of my duties, and I of my position as registered agent as provided for in Chapter 608, erely reflect a change in the registered office address, I hereby as been notified in writing of this change.  Asst. Vice President

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