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Florida Department of State
Division of Corporations
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LLC REGISTERED AGENT CHANGE
UH-SI, LLC

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Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UH-SI, LLC
Name 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 concerning this matter to the following:

PHIL DANIEL
Name of Person

UH-SI, LLC
Firm/Company

4707 ELM STREET, 2ND FLOOR
Address

BETHESDA MD 20814
City/State and Zip Code

PHIL.DANIEL@URGOHOTELS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PHIL DANIEL at (301) 657 2130
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 following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

DNHS18 (508)

FL215 - 10/02/18 CT System Online

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: UH S LLC
2. (a) Principal office address of limited liability company: _____

(Note: MUST BE STREET ADDRESS)

4707 ELM STREET
BETHESDA MD 20814 US

- (b) Mailing address of limited liability company: _____

(Note: MAY BE POST OFFICE BOX)

4707 ELM STREET
BETHESDA MD 20814 US

10/20/2009

L09000101521

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office 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 NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

C T Corporation System

NEW Registered Office Address:

1200 South Pine Island Road

(MUST BE FLORIDA STREET ADDRESS)

Plantation, FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Phil Daniel
Signature of a member or authorized representative of a member

PHIL DANIEL
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. If this document is being filed to merely reflect a change in the registered office address, I hereby certify that the limited liability company has been notified in writing of this change.

By:

Mark J. Dittenbaugh
Signature of Registered Agent

Mark J. Dittenbaugh
Asst. Secretary & V. President

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

FILING FEE: \$25.00

DNRS18 (05/08)

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