

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000032589

**FILED**  
**Mar 25, 2012**  
**Secretary of State**

**Entity Name:** THE VILLAGES HOSPITALITY, LLC

**Current Principal Place of Business:**

1205 AVENIDA CENTRAL NORTH  
LADY LAKE, FL 32159

**New Principal Place of Business:**

**Current Mailing Address:**

1205 AVENIDA CENTRAL NORTH  
LADY LAKE, FL 32159

**New Mailing Address:**

**FEI Number:** 01-0960205

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PATEL, ALPESH  
1205 AVENIDA CENTRAL NORTH  
LADY LAKE, FL 32159 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ALPESH PATEL

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PATEL, ALPESH  
Address: 5129 NE 124TH PLACE  
City-St-Zip: OXFORD, FL 34484

Title: MGRM  
Name: PATEL, BABUBHAI  
Address: 5129 NE 124TH PLACE  
City-St-Zip: OXFORD, FL 34484

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALPESH PATEL

MGRM

03/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date