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| (Requestor's Name) | |
|---|--|
| (Address) | |
| (Address) | |
| (City/State/Zip/Phone #) | |
| | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Charter One Hospitality, LLC

Name of Limited Liability Company

INCLAINSSEE I LORIDA

21 KOV 13 P 2: 15

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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:

Melissa Masiello

Name of Person

Charter One Hospitality, LLC

Firm/Company

5464 Lena Road

Address

Bradenton, FL 34211

City/State and Zip Code

mmasiello@charteronehotels.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

| Melissa Masiello | 941 907-9017 | | | | | |
|---------------------------------------|---|--|--|--|--|--|
| Name of Person | Area Code & Daytime Telephone Number | | | | | |
| STREET/COURIER ADDRESS: | MAILING ADDRESS: | | | | | |
| Registration Section | Registration Section | | | | | |
| Division of Corporations | Division of Corporations | | | | | |
| Clifton Building | P.O. Box 6327 | | | | | |
| 2661 Executive Center Circle | Tallahassee, Florida 32314 | | | | | |
| Tallahassec, Florida 32301 | | | | | | |
| Enclosed is a check for the following | Enclosed is a check for the following amount: | | | | | |
| \$25 Filing Fee | \$55 Filing Fee & Certified Copy | | | | | |

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.

| I. Na | me of the limited liability company: | e Hospitali | ty, LLC | | | |
|--|---|---|---|----------------------------|--|-------------------------|
| 2. (a) | Charter One Hospitality, LLC | (b) | (b) Charter One Hospitality, LLC | | | |
| (-) | Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>) | (-) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | | |
| | 5464 Lena Road | | 5464 Lena Road | | | |
| | Bradenton, FL 34211 | | Bradenton, FL 34211 | | | |
| | 1/12/11 | L | .11000004902 | | | |
| 3. | Date of filing/registration in Florida | 4. | Document | number | | |
| 5. (a) | John W Balliett | | | | | |
| (**) | Registered Agent and Registered Office shown on the records | of the Florida I | Dept. of State: | | | |
| | Registered Office Address (MUST BE FLORIDA STREE) 6731 Professional Parkway W Ste 100 | <u>T ADDRESS)</u> | | | | |
| | Sarasota | FL_34240 | <u> </u> | 5 8 | 27 | |
| (b) | John W Balliett | | | Link | E 1 AOR 412 | Ţ: |
| | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> | red Office add | ressi | MLLAHASSEL i Loni i | ر: ۲۱۷ | ; ; ; ; |
| | NEW Registered Office Address: | | <u> </u> | | ں ڊي | U |
| | 5464 Lena Road | | | <u> </u> | ភ | |
| | Sarasota, | FL_34240 | | | | |
| the cha agent w was/we the arti | imited liability company is not organized under the inge or changes are made, the Florida street address vill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member cles of organization of the operating agreement of the where of a member or authorized representative of a member | of the regist liability cor s of the limi | ered office and the binpany, it is hereby contend hability company ability company. | usiness off infirmed th | ice of the critical the critical the critical the critical the critical term is a second seco | e registere hange(s) |
| - | by accept the appointment as registered agent and a | igree to act i | | r 1 | | oly with the |

Thereby accept the appointment as registered agent and agree to act in this capacity. Turner 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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