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| PICK-UP | ☐ WAIT | MAIL |
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| | gistration Se vision of Cor | | | |
|---------------|--------------------------------|--|---|---|
| SUBJECT: | Brandon Ho | otel, LLC | | |
| SOBJECT | • | Name of Lim | ited Liability Company | |
| The enclose | ed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please retur | n all correspo | ndence concerning this matter | to the following: | |
| | | Mercedes G. Hale | | |
| | | <u> </u> | Name of Person | |
| | | Law Offices of Mercedes 0 | Gonzalez Hale, PA | |
| | | | Firm/Company | |
| | | 26907 Foggy Creek Road, | Suite 101 | |
| | | | Address | |
| | | Wesley Chapel, FL 33544 | | |
| | | | City/State and Zip Code | |
| | | E-mail address: (| to be used for future annual report notifi | ication) |
| For further i | information co | oncerning this matter, please ca | all: | |
| Mercedes C | 6. Hale | | 813 973-8900 at () | |
| | Name of | `Person | Area Code Daytime | Telephone Number |
| Enclosed is | a check for th | e following amount: | | |
| \$25.00 | Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Brandon Hotel, LLC | | |
|--|--|--------------------|
| (Name of the Limited Liability Company as it now appears on our rec (A Florida Limited Liability Company) | cords.) | |
| The Articles of Organization for this Limited Liability Company were filed on April 16, 2015 Clorida document number L13000055610 | and ass | igned |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liability company here: | | |
| he new name must be distinguishable and contain the words "Limited Liability Company," the designation "I | LLC" or the abbreviation "L. | L.C." |
| Enter new principal offices address, if applicable: | ······································ | |
| Principal office address MUST BE A STREET ADDRESS) | | |
| Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) | | |
| 3. If amending the registered agent and/or registered office address on our reco | ords, enter the name | of the |
| egistered agent and/or the new registered office address here: | | |
| Name of New Registered Agent: | HAY HAY | ¥. |
| New Registered Office Address: | 27 \$837 | Calenda Calenda |
| Enter Florida street ada | | |
| City | Florida Zip Code | ¥3, £8 |
| New Registered Agent's Signature, if changing Registered Agent: | | |

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 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.

If Changing Registered Agent, Signature of New Registered Agent

It amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|----------------------------|--|----------------|
| MGR | Pathmanath DeSilva | 1936 Bruce B. Downs Blvd | |
| | | Unit 176 | □ Remove |
| | | Wesley Chapel, FL 33544 | Change |
| MGR | DP Business Management LLC | 1936 Bruce B Downs Blvd | □ Add |
| | | Unit 176 | ■ Remove |
| | | Wesley Chapel, FL 33544 | Change |
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| ective date, if other than a effective date is listed, the date: If the date inserted in cument's effective date on | ate must be specific and ca this block does not mee | t the applicable statut | (op ling or more than 90 days at ory filing requirements, t | otional) fler filing.) Pursuan his date will not | belisted a |
| record specifies a de The 90th day after th | layed effective dat e record is filed. | e, but not an effe | ective time, at 12:03 | La.m. on the | earlier of |
| ted May 26 | Jan XX | 2015 | | | = |
| - squill | Signature of a mer | nber or authorized repre | sentative of a member | | |
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Page 3 of 3

Filing Fee: \$25.00