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SUBJE		Y HOSPITALITY, LLC		
JOBSE		Name of Lim	aited Liability Company	
The end	closed Articles of	Amendment and fcc(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Ann Kelly		
		· · · · · · · · · · · · · · · · · · ·	Name of Person	
		Lodgco Management		
			Firm/Company	
		5225 E. Pickard		
			Address	
		Mt. Pleasant, MI 48858		
			City/State and Zip Code	Ada .
		akelly@lodgco.net		
		E-mail address: (to be used for future annual report no	orification)
For fur	ther information co	oncerning this matter, please co	all;	
Ann K	elly		989 773-2400 at ()	
	Name of	Person	Area Code Dayti	me Telephone Number
Enclose	ed is a check for th	e following amount:		
\$25	5.00 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

CASEY KEY HOSPITALITY, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on May 15, 2015 and assigned Florida document number ______L15000089739 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter Be nafel registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

If 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>	Address	Type of Action
AMBR	PMG INVESTMENT HOLDINGS LLC	655 Meadowbrook	□ Add
		Mt. Pleasant, MI 48858	
			□ Change
AMBR	KDM HOLDINGS LLC	205 N. Franklin	
		Mt. Pleasant, MI 48858	■ Remove
			☐ Change
AMBR	WILLIAM L. MARTIN, TRUSTEGOF the WILLIAM L. MARTIN REVOCABLE	205 N. Franklin	
	Trust dated August 12, 1993	Mt. Pleasant, MI 48858	■ Remove
AMBR	TRI-MAR INVESTMENTS LLC	205 N. Franklin	HASS
		Mt. Pleasant, MI 48858	FE. F. SIIAI
			ORIDA Change
AMBR	AR HOSPITALITY GROUP II LIC	783 S. Orange Avenue - Suite 200	
		Sarasota, FL 34236	Remove
			☐ Change
MGR	MICHAEL R. SMITH	5225 E. Pickard	Add
		Mt. Pleasant, MI 48858	☐ Remove
		<u></u>	☐ Change

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effective date is listed, the date must be	specific and cannot be prior to de	ite of filing or more than 9	0 days after filing.) Pursuan	t py 6 05.0
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