## L15000155849

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## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PHK HOSPITALITY SERVICES LLC Name of Limited Liability Company
Ivalic of Digitor Elability 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:
Name of Person
AXK HOSPITALITY SERVICES LLC Firm/Company
29505 Jones Loop Rd
Punto Gordo; F/ 33950 City/State and Zip Code
E-maikaddress: (40 be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (941) 632-9735  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 \$\square\$ \$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.
1. Name of the limited liability company: Atk Haspitality Schuicks LLC
24 10505 Trace long Poly 1 / 20005 Tick
Principal office address of limited liability company:  Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
PUNTO GORDA FI 33950 FUNTO GORDA F/ 33950
9/14/15 215000155849
3. Date of filing/registration in Florida 4. Document number
5. (a) LESATING CORPORATE SCRUICES IN
Registered-Agent and Registered Office shown on the records of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
5237 Summer of NEW Registered Agent and/or NEW Registered Office address:
For the common time to get The
$\frac{ff}{f} = \frac{1}{2}$
(b) Ky/E BEES/INI
Enter name of NEW Registered Agent and/or NEW Registered Office address:
40H
UNIVERSAL LONG AND
NEW Registered Office Address:
29505 JONES LOOP RA
220CD
/UNID WORKS ,FL 33950
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 tote 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.
SI WI AMAR KILL BEESTING
Signature of a member or authorized representative of a member Printed or typed name of signee
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 shappe.

Signature of Registered Agent



October 14, 2016

VICTOR RIBON 25 SE 2ND AVE, STE 714 MIAMI, FL 33131

Re: Document Number: L16000127676

The Resignation/Dissociation of XAVIER BENLEZRAH, a Member/Manager for WALBAUM US LLC, a Florida Limited Liability Company was filed on October 14, 2016.

Should you have any questions regarding this matter, please telephone (850) 245-6051, the Registration Filing Section.

Letter Number: 716A00022167

Octavia I Simmons Regulatory Specialist II Division of Corporations

www.sunbiz.org