## LICOUDORSS

(Re	questor's Name)	
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	ty/State/Zip/Phone #)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
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Certified Copies	_ Certificates of	Status
Special Instructions to	Ciling Officer:	
Special instructions to	riing Officer.	





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## **COVER LETTER**

TO:	Registration Sec Division of Corp					
	-	HOSPITALITY GROUP,	LLC			
SUBJE	:СТ:	Name of Lim	ited Liability Company			
The end	closed Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please	return all correspon	dence concerning this matter	to the following:			
		MARK WARZECHA				
			Name of Person			
		WIDERMAN MALEK, PL				FILED
			Firm/Company			
, · -	••••	1990 W. NEW HAVEN	AVE., SUITE 201			
			Address			
• • •		MELBOURNE, FL 3290	)4			
,	• • •	REGISTEREDAGENT@US	City/State and Zip Code LEGALTEAM. COM			
	•	E-mail address: (	to be used for future annual report notifica	tion) =	4	
For fur	ther information co	oncerning this matter, please ca		אָרָר אָרָר	2018 SECT	- Adjug
MARK	WARZECHA		321 255-2332	HÀS	NOV 2	
	Name of	Person	at () Area Code Daytime T	elephone Number		
Enclose	ed is a check for the	e following amount:		ORIO	<b>=</b> = -	0
<b>⊠</b> \$2:	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate of Certified Co (additional cop	of Status & opy	

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

company has been notified in writing of this change.

## DocuSign Envelope ID: 03DC8FEA-5B02-410C-882D-0E345FDBE71B ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Name of New Registered Agent:  New Registered Office Address:    1990 w. New Haven ave., Suite 201   1	(Name of the Limi	ited Liability Company as it now appears on our records.)	<del> </del>
the Articles of Organization for this Limited Liability Company were filed on	<del></del>	(A Florida Limited Liability Company)	
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)  8. If amending the registered agent and/or registered office address on our records, enter the name of the egistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  MELBOURNE  Total	1.16000002888	Liability Company were filed on	and assigned
the new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC."  Inter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address on our records, enter the name of the egistered agent and/or the new registered office address here:    Name of New Registered Agent:   WIDERMAN MALEK, PL	his amendment is submitted to amend the fol	lowing:	
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 the name of the egistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  MELBOURNE  Discreption of the name of the segistered agent and/or registered office address on our records, enter the name of the name of the segistered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  MELBOURNE  City  Discreption of the name of	. If amending name, enter the new name o	of the limited liability company here:	
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 records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  MELBOURNE  MELBOURNE  Discreption of the name of	he new name must be distinguishable and contain the	words "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)  8. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  New Registered Office Address:  MELBOURNE  MELBOURNE  To the name of	Enter new principal offices address, if appli	cable:	
Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:    Name of New Registered Agent:   WIDERMAN MALEK, PL	Principal office address MUST BE A STRE	ET ADDRESS)	
Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:    Name of New Registered Agent:   WIDERMAN MALEK, PL		· · · · · · · · · · · · · · · · · · ·	
Mailing address MAY BE A POST OFFICE BOX)  3. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:    Name of New Registered Agent:   WIDERMAN MALEK, PL			
3. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:    Name of New Registered Agent:   WIDERMAN MALEK, PL   Description   Property   P	Enter new mailing address, if applicable:		
B. If amending the registered agent and/or registered office address on our records, enter the name of the registered agent and/or the new registered office address here:    Name of New Registered Agent:   WIDERMAN MALEK, PL   STORY	Mailing address MAY BE A POST OFFICE	E BOX)	
Name of New Registered Agent:  New Registered Office Address:    Middle			
Name of New Registered Agent:  New Registered Office Address:    1990 w. New Haven Ave., Suite 201   1990			
New Registered Office Address:    1990 W. NEW HAVEN AVE., SUITE 201   Control of the control of			AHASA NOV
MELBOURNE  Enter Florida street address  7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		1990 W. NEW HAVEN AVE., SUITE 201	് ന
MELBOURNE , Florida 32904	New Registered Office Address:	Enter Florida street address	
City > Zip Code		MET BOURNE	3 <b>29</b> 04
		, Florid	12 CS:+,
ew Registered Agent's Signature, if changing Registered Agent:		, Florid	

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

If Changing Registered Agent, Signature of New Registered Agent

DocuSign Envelope ID: 03DC8FEA-5B02-410C-882D-0E345FDBE71B
II amenuing Authorized rerson(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** □ Add

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fective date, if other than the on effective date is listed, the date must	date of filing:		(opt	ional) 🖫 🖽	<del></del>
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cument's effective date on the De	partment of State's reco	ds.			
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record specifies a delayed The 90th day after the reco	effective date, but ord is filed.	not an effective	time, at 12:01	a.m. on th	e earlier
October 21	2016				
DocuSigned by:	<del></del> -,	<del></del> •			
57					
-BFFBT038937E4EB.	Signature of a member or a	uthorized representativ	e of a member		

Page 3 of 3

Filing Fee: \$25.00