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C. GOLDEN

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· COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	MH ALTON LLC ECT:		
	•	ne of Limited L	iability Company
Dear S	ir or Madam:		
The en	closed Registered Agent/Registered Off	ice Change and	I fee(s) are submitted for filing.
Please	return all correspondence concerning th	is matter to the	following:
JAME	ES E. RAUH, ESQ.		
	Name of Person		
GRE	ENSPOON MARDER		
	Firm/Company	<u> </u>	
600 E	Brickell Avenue, Suite 3600		
	Address		
Miam	ii, Florida 33131		
	City/State and Zip Code		
sgold	enberg@meninhospitality.com		
E	-mail address: (to be used for future ann	nual report notif	ication)
For fur	ther information concerning this matter,	, please call:	
Jame	s E. Rauh, Esq.	305 at (789-2732)
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.G	AILING ADDRESS: ogistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314
	Enclosed is a check for the following	amount:	
	■ \$25 Filing Fee	- \$:	55 Filing Fee & Certified Copy
INHS18	R (2/14)		

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: MH ALTON	LLC			
2. (a)	(b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1600 Alton Road		Mailing address of limited (Note: MAY BE POST	-	-
	Miami Beach, Florida 33139	_			
	April 11, 2016	L160	000071498		
3. 5. (a	Date of filing/registration in Florida JAMES E. RAUH, ESQ.	4.	Document number		
J. (a	Registered Agent and Registered Office shown on the records of GREENSPOON MARDER	of the Florida Dept.	of State:		
	Registered Office Address (MUST BE FLORIDA STREET) 1601 Washington Avenue, Suite 300	ADDRESS)		2019 MAR 2 I	
	Miami Beach , F	33139		AR 21	
(b)	Enter name of NEW Registered Agent and/or NEW Registere GREENSPOON MARDER	ed Office address:		R 21 AM 8: 36	
	NEW Registered Office Address:				
	600 Brickell Avenue, Suite 3600				
	Miami, F.	L_33131			
the ch agent was/w the art	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited latere authorized by an affirmative vote of the members tiples of organization or the operating agreement of the number of a member or authorized representative of a member	of the registered iability compan- of the limited li- e limited liability	office and the business offi y, it is hereby confirmed the ability company or as other	ice of the reg at the change wise provide	istered (s)
I here provis the ob	by accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act in this e performance o ed for in Chapte hereby confirm	s canacity. I further navee	to comply wi	th the accept g filed een
Signati	are of Registered Agent	•			

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