

L19000202362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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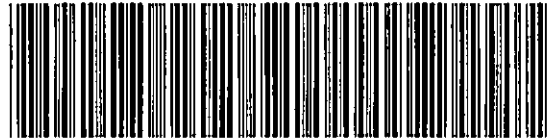
(Business Entity Name)

(Document Number)

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2021 NOV 10 PM 12:01

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 1, 2021

MICHAEL SCHREIBSTEIN
8850 STANFORD BLVD
SUITE 2900
COLUMBIA, MD

SUBJECT: TAMPA BUSCH HOTEL LLC
Ref. Number: L19000202362

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas
Regulatory Specialist II

Letter Number: 721A00026583

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tampa Busch Hotel LLC
Name of Limited Liability 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:

Michael Schreiberstein

Name of Person

Offit Kurman

Firm/Company

8850 Stanford Boulevard, Suite 2900

Address

Columbia, Maryland 21045

City/State and Zip Code

mschreiberstein@offitkurman.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Schreiberstein at (301) 575-0314
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$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: Tampa Busch Hotel LLC

2. (a) 9202 N 30th Street, Tampa, Florida 33612
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) 9202 N 30th Street, Tampa, Florida 33612
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. August 8, 2019 Date of filing/registration in Florida

4. L19000202362 Document number

5. (a) Registered Agents, Inc.
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
7901 4th St., N., Suite 300
St. Petersburg, FL 33702

(b) Rohan Patel
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:
9202 N 30th Street

Tampa, FL 33612

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 vote 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.

Jayesh Patel
Signature of a member or authorized representative of a member

Jayesh Patel
Printed or typed name of signer

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.

By: Jayesh Patel
Signature of Registered Agent

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

FILED
2021 NOV 10 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FL