L21000415335

(Requestor's Name)						
(Address)						
(Address)						
	(City/State/Zip/Phone #)					
PICK-UF	P WAIT MAIL					
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions to Filing Officer:						





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ALLAHASSEE FLORI

SECKE JANY OF STA

A. BUTLER MAY 20 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

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	ACCOUNT NO.	:	12000000195				
	REFERENCE	:					
	AUTHORIZATION	:	Spulledenan				
	COST LIMIT	:	\$ 25.00 \$				
ORDER DATE :	May 18, 2022						
ORDER TIME :	7:57 AM						
ORDER NO. : 692352-005							
CUSTOMER NO:	8281792						
	- 						
CHANGE OF AGENT							
NAME: BLUE DOLPHIN HOTEL GP LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY							
XX PLAIN STAMPED COPY							

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

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. N	lame of the limited liability company: BLUE DOLPH	IN HOTE	L GP LLC				
2. (a)	·	((h)				
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	1412 NW 23RD ST.		1412 NV	V 23RD ST.			
	MIAMI, FL 33142	MIAMI, FL 33142					
	09/20/2021		L2100041	5335			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)						
5. (a	Registered Agent and Registered Office shown on the records of LITTLEWOOD, CODY	of the Florid	la Dept, of Sta	ate:			
	Registered Office Address (MUST BE FLORIDA STREET 1412 NW 23RD ST.	T ADDRES	<u>SS)</u>	_			
	MIAMI	33142		2027 SE			
(b)							
	Corporation Service Company			AM 9: 30 Y OF STATE SSEE, FI.			
	NEW Registered Office Address:	F.AT 3					
	1201 Hays Street			- m C			
	Tallahassee F	32301		_			
chang agent was/w	limited liability company is not organized under the lace or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lacere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	ne register liability c of the lin	red office ar ompany, it nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in			
	/s/Cody Littlewood	Co	dy Littlewoo	od, Authorized Person			
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee			
provis the ob to mei	why accept the appointment as registered agent and agions of all statutes relative to the proper and completed igations of my position as registered agent as provided in the registered office address, fed in writing of this change.	gree to ac e perforn led for in I hereby c	t in this cap iance of my Chapter 60 confirm that	oucity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been			
	/s/Grace E. Kirby	Grace E.	Kirby, Asst Vice President				
Signat	ure of Registered Agent						