## Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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<u>:</u>

## LLC REGISTERED AGENT CHANGE E & J LUXURY STAYS, LLC

| Certificate of Status | 0       |
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## 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

| <i>(a)</i> | Principal office address of limited liability of (Note: MUST BE STREET ADDRES | ompany:                 | b)              | Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX) |
|------------|---|-------------------------|-----------------|---|
|            | 09/27/2021  |                         | L210            | 00424059  |
|            | Date of filing/registration in Florid   | da 4.                   |                 | Document number   |
| (a)        | INC AUTHORITY RA  |                         |                 |   |
|            | Registered Agent and Registered Office shown on the                           | ne records of the Flori | a Dept. of S    | tate:   |
|            | 390 NORTH ORANGE AVE.,  | STE 2300-N              |                 |   |
|            | Registered Office Address (MUST BE FLORID                                     | A STREET ADDRES         | <u>S)</u>       |   |
|            | ORLANDO   | , <sub>FL</sub> 3280    | 1               | _   |
|            |   |                         |                 |   |
| b)         | Registered Agents Inc.  |                         |                 |   |
| (b)        | Registered Agents Inc.  Enter name of NEW Registered Agent and/or NEW         | V Registered Office a   | idress:         |   |
| b)         |   | V Registered Office a   | ldress:         |   |
| b)         | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>                   | V Registered Office a   | ldress:         |   |
| (b)        | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>                   | V Registered Office a   | <u>ldress</u> : |   |

| Rilmy Park   | Riley Park                      |
|--|---------------------------------|
| 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 change.

Bill Havre - Assistant Secretary

Signature of Registered Agent