Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000270360 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-038**0**

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5926

REGISTERED AGENT CHANGE

INTOWN SUITES BRANDON, LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	02	
Estimated Charge	\$36.00	
	7300	

Electronic Filing Menu

Corporate Filing Menu

Help

11/7/2006

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provision liability company submits agent, or both, in the State	the following staten	l6 or 608,508 nent in order	Florida Statutes, the to change its registered	undersigned limited loffice or registered			
1. The name of the limited	liability company i	s: <u>Intown Suite</u>	Brandon, LLC	·			
2. The mailing address of	the limited liability	company is:			•		
2727 Paces Forry Rd., Stc II-12	00, Atlanta, GA 30339						
7/6/2005	·-		M05000003877				
3. Date of filing/registration	on in Florida		4. Document number				
5. The name of the register Florida Department of S	red agent and the reg State:	ristered office	address as shown on the	records of the	i		
•	Corporation Service Cor	ораду	•				
		Name					
	1201 Hays Street			06 06	ı		
Address				<u> </u>			
Tallahassee, FL 32301			£ 59	₽			
	City	y, State and Zi	p				
6. The name and address of the new registered agent and/or office:			<u>-1 -2</u>	zz =			
C T Corporation System			ŘPOŘAT AM 10:	FO STATE			
Name			O. RA	=			
1200 South Fine Island Road			39 39	F			
	Florida street addre	ess (P.O. Box i	NOT acceptable)	G 35	,		
	Plantation	FL	33324		<i>:</i>		
	City,	State and Zip					
If the limited liability come confirmed that after the chand the business office of liability company, it is her of the members of the lim or the operating agreement (Signature of a member or author)	ange or changes are the registered agent eby confirmed that t lited liability compar t of the limited liabil	made, the Flor will be identic he change(s) v ny or as otherw lity company.	rids street address of the al. Or, in the case of a l vas/were authorized by	e registered office Florida limited an affirmative vote			
I hereby accept the appoil comply with the provision and I am familiar with and Chapter QQ, F,S. Or, if the	ntment as registered s of all statules relat d accept the obligation his document is bein that the limited liabi oration System Pall W		ee to act in this capacit er and complete perfor lion as registered agent ly reflect a change in th as been notified in writ	y. I further agree to mance of my auties, as provided for in le registered office ling of this change.			
(Signature of Registered Agent)	ASSISTANTV	ICE PRESIDENT			1		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 . FILING FRE: \$25.00							
INH\$18 (8/05)							

11/01/2006 16:35 8508785926

TOTAL P.06