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Office Use Only



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115 N CALHOUN ST., STE. 43: TALLAHASSEE. FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	06/04/2021	
Name:		_
Reference	1378999	_
Entity Nan	ne: RLJ III - EM WEST P	ALM BEACH LESSEE, LLC
☐ Arti	cles of Incorporation/Authorization	to Transact Business
Am	endment	
₽ Cha	ange of Agent	
Rei	nstatement	
☐ Cor	nversion	
☐ Mei	rger	
Dis	solution/Withdrawal	
☐ Fict	litious Name	
Oth	ner	
Authorized	1 Told Views	

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

(a) <u>-</u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	No Change		lo Change
	06/10/2010		M10000002579
	Date of filing/registration in Florida	4.	Document number
(b)	Registered Agent and Registered Office shown on the records of 801 US HIGHWAY 1 Registered Office Address (MUST BE FLORIDA STREET) NORTH PALM BEACH Florida STREET COGENCY GLOBAL INC. Enter name of NEW Registered Agent and/or NEW Registered 115 North Calhoun St., Suite 4	33408	2821 JUN -4 AM 10
	NEW Registered Office Address:		
	Tallahassee, Fi	_{L_} 32301	
chai nt w /we	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members des of organization or the operating agreement of the	of the register iability comp of the limited	ed office and the business office of the regist pany, it is hereby confirmed that the change(s I liability company or as otherwise provided
	g r d g ·······		ck D. McKalip

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.

/s/ Tim Mayville

Signature of Registered Agent