Division of Corporations **Electronic Filing Cover Sheet** 

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Division of Corporations

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Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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Small	Address:

LLC REGISTERED AGENT CHANGE RLJ IU - EM FORT MYERS LESSEE, LLC

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Certificate of Status	0
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6/13/14 12:37 PM

## 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 affice or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: RLJ III - EM	FORT M	YERS LESSEE, LLC
2. (a)	C/Ò PLU ODGING TRUST	(ხ	C/O BL H ODGING TRUST
(-)	Principal office address of limited liability company:  (Note: MUST RESTREET ADDRESS)  3 BETHESDA METRO CENTER, STE. 10	•	Mailing address of limited liability company, (Nate: MAY DE POST OFFICE DOX)  3 BETHESDA METRO CENTER, STE. 10
	BETHESDA, MD 20814	·····	BETHESDA, MD 20814
	06/11/2010		M10000002623
3.	Date of filing/registration in Florida	4.	Document number
5. (a	)		
• .	Rogistered Agent and Registered Office shown on the records of NRAI SERVICES, INC	of the Florida	Dept, of State:
	Registered Office Address	T ADDRESS	产级 章
	PLANTATION, F	<sub>L</sub> 33324	
(b)			- <u>β</u> :Ω ω · .
(-)	Enter name of NEW Registered Agent and/or NEW Registers	ed Offige adj	
	Corporate Creations Network Inc.		igaria <b>g</b> Parta <b>f</b>
	NEW Registered Office Address:		5-70
	11380 Prosperity Farms Rd. #221E		
	Palm Beach Gardens , f	33410	
the chagent was/v	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the regis liability co s of the lim	stered office and the business office of the registered impany, it is hereby confirmed that the change(s) lited liability company or as otherwise provided in
	affilishup	Val	erie Hawk-Donohue, Attorney in Fact
Sign	white of a member or authorized representative of a member		Printed or typed name of signee
I her provi- the al- to me	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as provide rely reflect a change in the registered office address, and in writing of this change.	gree to act ie perform ded for in C I hereby ce	t in this capacity. I further agree to comply with the ance of my duties, and I am Jamiliar with and accept Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been

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

Volling Velexie Hawk-Donobue Special Secretary Signature of Registered Agent