M10000002646

(R	lequestor's Name)		
(A	ddress)		
(A	ddress)		
(C	City/State/Zip/Phone	· #)	
PICK-UP	WAIT	MAIL	
(E	Business Entity Nan	ne)	
(Document Number)			
Centified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



500366854235

2821 JUN -4 AM 10: 20

2821 JUS - 4 AM 11: 5

RARC Ch8

JUN 07 2021 LALBRITTON



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date: _	e:06/04/2021				
Name:	ne:Chris Vick				
Refere	erence #:				
Entity	ty Name: RLJ III - EM FORT MYERS, L	LC			
	Articles of Incorporation/Authorization to Transact Busine				
	Amendment				
~	Change of Agent				
	Reinstatement				
	Conversion				
	Merger				
	Dissolution/Withdrawal				
	☐ Fictitious Name				
	Other				
Author Signat	norized Amount: \$25.00				

F: 800.944.6607

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.

2. (a)		(b)	
 (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BON)
	No Change		No Change
	6/11/2010		M10000002646
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Corporate Creations Network Inc.		
, ,	Registered Agent and Registered Office shown on the record	ls of the Florida D	Dept. of State:
	801 US HIGHWAY 1		
	Registered Office Address	EET ADDRESS)	
	NORTH PALM BEACH	, FL_33408	2021
(b)	COGENCY GLOBAL INC.		
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>		ered Office addr	ess:
	115 North Calhoun St., Suite 4		2021 JUNI -4 AM 10: 20
	NEW Registered Office Address:		# 20 FL
	Taliahassee	. FL 32301	
the cha agent was/was/was/was/was/was/was/was/was/was/	will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the memberieles of organization or the operating agreement of rederick D. McKalip ture of a member or authorized representative of a member by accept the appointment as registered agent and thus of all statutes relative to the proper and committees of all statutes relative to the proper and committees.	ed liability concers of the limite the limited lia Frede	ered office and the business office of the registered opany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in bility company. rick D. McKalip Printed or typed name of signee

/s/ Tim Mayville

Signature of Registered Agent

Tim Mayville, Assistant Secretary Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00