

M11000002449

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

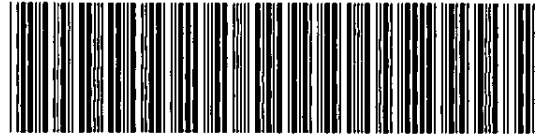
Special Instructions to Filing Officer:

B. KOHR

OCT 18 2011

EXAMINER

Office Use Only



200213349152

RECEIVED

11 OCT 18 PM 1:41

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 OCT 18 PM 2:27



CORPORATION SERVICE COMPANY

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 OCT 18 PM 2:27

ACCOUNT NO. : I20000000195

REFERENCE : 949133 7687982

AUTHORIZATION

*Spuddean*

COST LIMIT : \$ 25.00

ORDER DATE : October 18, 2011

ORDER TIME : 1:02 PM

ORDER NO. : 949133-005

CUSTOMER NO: 7687982

FOREIGN FILINGS

NAME: GARRISON ALL SUITES FLORIDA  
LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 OCT 18 PM 2:27

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GARRISON ALL SUITES FLORIDA LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRAD HARRIS

Name of Person

GARRISON INVESTMENT GROUP LP

Firm/Company

1350 AVENUE OF THE AMERICAS, 9TH FLOOR

Address

NEW YORK, NY 10019

City/State and Zip Code

BHARRIS@GARRISONINV.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BRAD HARRIS at ( 212 ) 372-9514

Name of Person

Area Code and Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

CR2E123(8/07)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 OCT 18 PM 2:27

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY  
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Garrison All Suites Florida LLC
2. This entity was formed under the laws of: Delaware
3. This entity was authorized to transact business in Florida on May 13, 2011  
and its Florida document/registration number is M11000002449
4. The name and address of each manager or managing member is as follows:

Title:  
"MGR" = Manager  
"MGRM" = Managing Member

Name and Address:

MGR

Brian Chase  
1350 Avenue of the Americas, 9th Floor  
New York, NY 10019

MGR

Julian Weldon  
1350 Avenue of the Americas, 9th Floor  
New York, NY 10019

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Required Signature:   
Signature of Manager, Managing Member or Member

Filing Fee: \$25