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Date: 07/30/2015 Account #: I20000000088 Name: ERIC HOOD Reference #: C013815 ENTITY NAME: FT. LAUDERDALE ES HOTEL, L.L.C. Articles of Incorporation/Authorization to Transact Business Amendment Annual Report Change of Agent Reinstatement Conversion Merger Dissolution/Withdrawal Fictitious Name Other: Authorized Amount: 25

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

Pursuant to the provisions of sections 605.0114, 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) 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) 10000005019 10000005019 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: 1200 South Pine Island Road	i. Na	me of the limited liability company: _	FT. LAUDE	RDALE ES HOTEL,	L.L.C.
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 9/6/2012 M12000005019 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Registered Office Address: Registered Agent: NEW Registered Office Address: NEW	2. (a)	Principal office address of limited liab	oility company: ESS)	545 E. John Carpenter Fro	eeway, Suite 1300
(Note: MAY BE POST OFFICE BOX) 9/6/2012 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Registered Office Address: NEW Registered Agent: NEW Registered Agent: NEW Registered Agent: NEW Registered Agent: NEW Registered Office Address: (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it's hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of like limited liability company. Mark Thomas, Attorney in Fact Printed or typed name of signes 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 an agrilled with appropriate the obligations of my position as registered agent as provided of the Address. I hereby applies that liability company has been notified in writing of his Advance. Signature of Registered Agent Sean Honan, Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.			 ,	Irving, TX 75062	
9/6/2012 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: C T Corporation System				545 E. John Carpenter F	Freeway, Suite 1300
3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: Registered Office Address: 1200 South Pine Island Road			<u> </u>	Irving, TX 75082	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Agent: Registered Office Address: 1200 South Pine Island Road	9/6/2	2012		M12000005019	
Registered Agent: Registered Office Address: 1200 South Pine Island Road Plantation, FL 33324 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, bit hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or alle operating greement of the imited liability company. Mark Thomas, Attorney in Fact Printed or typed name of signee 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 a member of a member of the obligations of my position as registered agent and any agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties and a manual provided to the obligations of my position as registered agent and areas, the provision of all statutes relative to the proper and complete performance of my duties. I hereby confirm that the limited liability company has been notified in writing of his change. Signature of Registered Agent Sean Honan, Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.	3. Da	te of filing/registration in Florida	4	1. Document number	
Registered Office Address: Plantation, FL 33324	5. (a)	Registered Agent and Registered Off	ice shown on tl	ne records of the Flori	da Dept. of State:
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Mark Thomas, Attorney in Fact Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to compily with the provisions of all statutes relative to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 603. F.S. Or, if this document is being filled to hereby reflect a charge in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this shange. Signature of Registered Agent Sean Honan, Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		Registered Agent:		C T Corporation Sy	/stem
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: National Corporate Research, Ltd., Inc. 115 North Calhoun St., Suite 4 Tallahassee FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it's hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Mark Thornas, Attorney in Fact Printed or typed name of signee 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 Ignitify with and accept the obligations of my position as registered ogent as provided for in Chapter 605, F.S. Or, if this document is being filled 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. Signature of Registered Agent Sean Honan, Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	Registered Office Address:			1200 South Pine Island Road	
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Mark Thomas, Attorney in Fact Printed or typed name of signee 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 60.5, F. S. Or, if this accument is being filled to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of initial change. Signature of Registered Agent Sean Honan, Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314				Plantation, FL 33324	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) To lashasses The state of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the furnited liability company. Mark Thomas, Attorney in Fact Printed or typed name of signee 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 lamiliar 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 filled to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of Intig Anange. Signature of Registered Agent Sean Honan, Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	(b)	Enter name of NEW Registered Age	nt and/or <u>NEV</u>	Registered Office a	ddress:
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Mark Thomas, Attorney in Fact Printed or typed name of signee 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. Signature of Registered Agent Sean Honan, Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314	confin and the liabilit the me	med that after the change or changes are business office of the registered agency company, it is hereby confirmed that imbers of the limited liability company erating agreement of the limited liability.	e made, the Flot will be idention the change(s) or as otherwise y company.	vrida etraat addrace of	the registered office
Printed or typed name of signee 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 statules relative to the proper and complete performance of my duties, and I am faint 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. Signature of Registered Agent Sean Honan, Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00	Bignatur	e of a member or authorized representative of a mer	nber	•	
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Signature of Registered Agent Sean Honan, Assistant Secretary Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00		by accept the appointment as registere y with the provisions of all statutes reld mm familiar with and accept the obliga er 605, F.S. Or, if this document is bei ss, I hereby confirm that the limited lial	d agent and ag tive to the pro- ions of my pos- ng filed to mer- vility company	ree to act in this capa per and complete perf ition as registered age ely reflect a change in has been notified in w	• <u>-</u>
Division of Corporations, P.O. Box 6327, Tallahassee, FL 323142 6 FILING FEE: \$25.00	Signatus		tant Secretor	v.	
INHS18 (12/13) FILING FEE: \$25.00 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □		Division of Corporations.	P.O. Box 632	, 7, Tallahassee. FL 3	
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