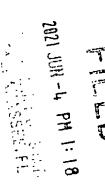
M1200000529

(Requestor's Name)
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115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date:	06/04/2021	
	Chris Vick	
Reference #	4070000	
Entity Name	e:MIAMI	AP HOTEL, L.L.C.
	es of Incorporation/Authorizat	
Ame	ndment	
✓ Chan	nge of Agent	
Reins	statement	
Conv	version	
☐ Merg	er	
☐ Disso	olution/Withdrawal	
☐ Fictiti	ious Name	·
Othe	r	
Authorized A	Amount: \$25.00	

P: 800.221.0102

F: 800.944.6607

F: +852.2682.9790

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.

. Na l. (a)	nme of the limited liability company: <u>MIAMI A</u>	(1.)	·	
. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	No Change	<u>N</u>	o Change	
	11/26/2012		M12000006529	
	Date of filing/registration in Florida	4.	Document number	
. (a)	CORPORATE CREATIONS NETWORK INC			
. (4)	Registered Agent and Registered Office shown on the record	ds of the Florida Der	ot, of State:	
	801 US HIGHWAY 1		. 20	
	Registered Office Address (MUST BE FLORIDA STRI	EET ADDRESS)	202 JUL	
	NORTH PALM BEACH	FL_33408		
(b)	COGENCY GLOBAL INC.			
•	Enter name of NEW Registered Agent and/or NEW Regis	<u> </u>		
	115 North Calhoun St., Suite 4			
	NEW Registered Office 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.

Frederick D. McKalip

Signature of a member or authorized representative of a member

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.

/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