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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : ALENA HOSPITALITY
Account Number : I20140000023
Phone : (407) 641-2611
Fax Number : (800) 263-1102

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2014 OCT -8 AM 9:06
TALLAHASSEE FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: nikpatel2001@gmail.com

RECEIVED
14 OCT -8 PM 12:00
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
500 HAMILTON HOTEL LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

OCT 09 2014
J. BRUCE

H140002355603

Oct. 8. 2014 2:21PM

No. 1390 P. 2

COVER LETTER

1140002355603

TO: Registration Section
Division of Corporations

SUBJECT: 500 Hamilton Hotel, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nikesh A. Patel
Name of Person

Alena Hospitality, LLC
Firm/Company

7335 W Sand Lake Rd, Ste. 390
Address

Orlando, FL 32819
City/State and Zip Code

nikpatel2001@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nikesh A. Patel at ()
Name of Person Area Code & 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 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (12/13)

1140002355603

FILED
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TALLAHASSEE FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

H140002355603

SECTION I (1-3 must be completed)

M13 00000 4404

1. Name of limited liability Company as it appears on the records of the Florida Department of State: 500 Hamilton Hotel, LLC

2. Jurisdiction of its organization: ~~Delaware~~ Illinois

3. Date authorized to do business in Florida: 7/8/2013

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change: Delete or Remove AR William R. Huseman, Esq. and replace with Nikesh A. Patel.

7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of the authorized representative

Nikesh A. Patel

Typed or printed name of signer

Filing Fee: \$25.00

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