

Oct. 8. 2014 2:24PM  
Division of Corporations

No. 1389 P. 1/3  
Page 1 of 2

**M1300004635** H140002355683  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000235568 3)))



H140002355683ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

\*\*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  
ALENA HOSPITALITY SADDLE BROOK, LLC

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

H140002355683

Electronic Filing Menu

Corporate Filing Menu

OCT 09 2014 Help

S. YOUNG

Oct. 8. 2014 2:24PM

No. 1389 P. 2/3

**COVER LETTER**

14140002355683

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Alena Hospitality Saddle Brook, 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:

Nukesh 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)

14140002355683

FILED  
14 OCT -8 PM 12:47  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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

H140002355683

**SECTION I (1-3 must be completed)**

M13000004635

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Alena Hospitality Saddle Brook, LLC
2. Jurisdiction of its organization: ~~Delaware~~ New Jersey
3. Date authorized to do business in Florida: 7/23/2014

**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)(e), indicate that change: Delete or Remove AMBR William R. Huseman and Replace with NIKESH A. Patel. Also Remove Registered Agent as William R. Huseman, Esq.

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 signee

Filing Fee: \$25.00

FILED  
OCT - 8 2014  
14  
AMERICA'S  
1000000

H140002355683