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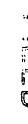
I ALBRITTON

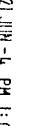
(Requestor's Name)					
(Address)	60036685				
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)	,				
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer.	•				
	RAROICHS.				
	KTINU :				

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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	
Name:	Chris Vick	<u> </u>
Reference #:	1378999	<u></u>
Entity Name:	RLJ CABANA	A MIAMI BEACH, LLC
Articles	s of Incorporation/Authorizatio	n to Transact Business
☐ Amend	dment	
✓ Chang	e of Agent	
Reinsta	atement	
Conve	rsion	
Merge	г	
Dissolu	ution/Withdrawal	
☐ Fictitio	us Name	
Other_		
Authorized Ar Signature:	mount \$25.00	

F: 800.944.6607

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.

2. (a)	ame of the limited liability company: RU CABA	(b)					
2. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BON)					
	No Change		No Cha	nge			<u>.</u>
	10/9/2013		М	13000006425			
3.	Date of filing/registration in Florida	4.		Document number	er.		
5. (a)	Corporate Creations Network Inc.						
<i>5.</i> (u)	Registered Agent and Registered Office shown on the record	s of the Florida	Dept. of Stat	e:			
	801 US HIGHWAY 1						
	Registered Office Address	ET ADDRESS)		-	1	2021	u 2773
	NORTH PALM BEACH	FL_33408		_	7.	2021 JUN -4	
(b)	COGENCY GLOBAL INC.				. A. 7.3.50Es	60 :1 Wd	
	Enter name of NEW Registered Agent and/or NEW Register	ered Office add	ress:			-:	
	115 North Calhoun St., Suite 4			_	175) 9	
	NEW Registered Office Address:						
	Tallahassee	FL 32301	-	-			
the cha agent was/we the art /s/ Fi Signa / here provise the obe to mer	imited liability company is not organized under the inge or changes are made, the Florida street addres will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the memberieles of organization or the operating agreement of rederick D. McKalip accept the appointment as registered agent and ions of all statutes relative to the proper and compilications of my position as registered agent as provedly reflect a change in the registered office address of in writing of this change.	s of the regis d liability co ers of the limited li Frede	tered offic npany, it i ted liabilit ability con erick D. N	e and the business is hereby confirme by company or as on any or as on any. McKalip Printed or typed nany or as on any or any or typed nany	office of that the office of signe	f the re e chang provid	gistered ge(s) ded in

Tim Mayville, Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

Signature of Registered Agent