

M14000004200

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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MAIL

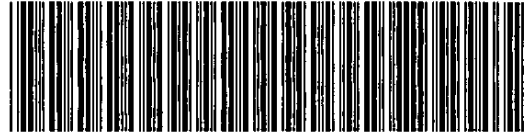
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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OCT 19 2016

# Orr&Reno

October 14, 2016

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Zachary D. Bland  
Juliana DiGesu

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

**Re: Change of Registered Agent/Notice of Withdrawal**

Dear Sir/Madam:

Enclosed please find a check in the amount of \$175 representing the filing fee for Statement of Change of Registered Agent/Office for the following entities:

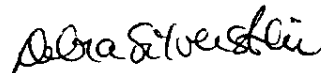
1. Hialeah Hotel Investment Group, LLC
2. LCP Hialeah Gardens Hospitality, LLC
3. Hialeah EMP Enterprises, LLC
4. LCP Daytona, LLC
5. Daytona RE Operating Company, LLC
6. BHIG Daytona, LLC

The enclosed check also includes the filing fee of \$25 for the enclosed Notice of Withdrawal of Certificate of Authority for LCP Tampa East Operating, LLC.

Kindly return the acknowledgment copies of the filings to my attention.

Should you have any questions, please contact me at 603-223-9140 or [dsilverstein@orr-reno.com](mailto:dsilverstein@orr-reno.com). Thank you.

Sincerely,



Debra L. Silverstein  
Paralegal

Enclosure  
1612073\_1

-----  
Neil F. Castaldo  
(Of Counsel)

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BHIG Daytona, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Debra Silverstein, Paralegal  
Name of Person

Orr & Reno, PA  
Firm/Company

PO Box 3550  
Address

Concord, NH 03302  
City/State and Zip Code

dsilverstein@orr-reno.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra Silverstein at ( 603 ) 223-9140  
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

\$55 Filing Fee & Certified Copy



**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.*

1. Name of the limited liability company: BHIG Daytona, LLC

2. (a) 269 Hanover Street (b) 269 Hanover Street  
 Principal office address of limited liability company: Mailing address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)* *(Note: MAY BE POST OFFICE BOX)*  
Hanover, MA 02339 Hanover, MA 02339

3. June 13, 2014 4. M14000004200  
 Date of filing/registration in Florida Document number

5. (a) Lowndes, Drosdick, Doster, Kantor & Reed, PA  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
215 North Eola Drive  
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

Orlando, FL 32801

(b) Jay F. Cook, Esq.  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

9123 Trivoli Terrace  
NEW Registered Office Address:  
Naples, FL 34119

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 TALLAHASSEE, FLORIDA

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.

Glenn Gistis

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.*

Jay F. Cook  
 Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
 FILING FEE: \$25.00