## P15H 00000 H219

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Dusiness Entity Name)								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
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800441639078

2025 JAN - 2 MAIN: 31
SECRETARY OF STATE
STALLARY SEE, FI

1025 JAN -2 PM 3: 22

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500



ACCOUNT NO. : I2000000195

REFERENCE : 847608\_

AUTHORIZATION :

COST LIMIT : \$ 25. Suormission date as file date.

ORDER DATE: December 18, 2024

ORDER TIME : 12:22 PM

ORDER NO. : 847608-008

CUSTOMER NO: 5057825

## CHANGE OF AGENT

A-R HHC ORLANDO CONVENTION NAME:

HOTEL MEZZ, LLC

PΙ	EASE	RETURN	THE	FOLLOWING	AS	PROOF	OF	FILING
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\_ CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller

EXAMINER'S INITIALS: \_\_\_\_\_

## 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. N	ame of the limited liability company:  A-R HHC ORLA	ANDO C	ONVE	NTION HOTEL MEZZ, LLC			
2. (a)							
(,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	<del></del> `	(b)				
	1777 WALKER ST. STE 501		HOUSTON, TX 77010				
	HOUSTON, TX 77010						
	06/16/2014		M1400004219				
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)							
5. (a)	Registered Agent and Registered Office shown on the records of C T CORPORATION SYSTEM	f the Florid	la Dept.				
	Registered Office Address	ADDRES	<u>(S)</u>				
	1200 SOUTH PINE ISLAND ROAD						
	PLANTATION	33324 L_	.,	MISJAN-2 FANIL 31 SECRETARY OF STATE SECRETARY OF STATE  SECRETARY			
(b)		<u>.</u>					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	17.00 ···					
	Corporation Service Company						
	NEW Registered Office Address:	_					
	1201 Hays Street						
	Tallahassee, FI	32301					
change agent was/w was/w the art /s/Ira N	limited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the M. Mitzner	register ability co of the line limited	ed offi ompany nited li	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.  Zner			
-	ature of a member or authorized representative of a member			Printed or typed name of signee			
provis. the obi to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change.	ree to ac perform d for in hereby c	t in thi: lance o Chapte onfirm	s capacity. I further agree to comply with the f my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed that the limited liability company has been			
Signatu	ure of Registered Agent Grace E. Kirby, Asst. Vice Presi	dent					

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