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(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer.				

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Account#: I2000000088

Date:	06/04/2021	
	Chris Vick	<u> </u>
Reference #	4070000	
Entity Name	RLJ DBT KEY	WEST CONDOS, LLC
	es of Incorporation/Authorizatio	
Amer	ndment	
☑ Chan	nge of Agent	
Reins	statement	
Conv	version	
☐ Merg	er	
Disso	olution/Withdrawal	
☐ Fictiti	ious Name	
Othe	r	
Authorized A	Amount \$25.00	

F: 800.944.6607

F: +852.2682.9790

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.

	The state of the s	(b)					
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			ling address of li Note: MAYBE I		-	-
	No Change		No Change				
	8/27/2014	_	M140	000006130			
3.	Date of filing/registration in Florida	4.	De	ocument numb	ber		
5. (a)	Corporate Creations Network Inc.						
	Registered Agent and Registered Office shown on the records of	if the Florida I	Dept. of State:				
	801 US HIGHWAY 1						
	Registered Office Address (MUST BE FLORIDA STREET	TADDRESS)				2821 JUN -4	-
	NORTH PALM BEACH F	133408					श्राम्बर्क इत्यास्य व
(h)	COGENCY GLOBAL INC.					PH	18.1
11.7	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office add	ress:			PM 1: 08	O
	115 North Calhoun St., Suite 4						
	NEW Registered Office Address:						
	Tallahassee	L_32301					
the cha agent v was/w	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regist liability cor of the limi	ered office an npany, it is he led liability co	nd the busines ereby confirm ompany or as	ss office of red that the	of the i he chai	registerec nge(s)
	rederick D. McKalip		rick D. McF				
Signa	ture of a member or authorized representative of a member		Pri	rinted or typed na	une of sign	nee	
	by accept the appointment as registered agent and ag	ree to act i	n this capacii	iv. I further a les, and I am S. Or, if this I limited liabil	igree to c	comply	with the

Tim Mayville, Assistant Secretary

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

Signature of Registered Agent