Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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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. \*\*

S

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALENA HOSPITALITY UCF, LLC

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

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No. 1387

TO: Registration Section Division of Corporations

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:

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Bullding 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 Fcc

□ \$30 Filing Fee & Certificate of Status

□ \$55 Filing Fee & Certified Copy

□ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (12/13)

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Oct. 8. 2014 2:22PM

## H1400: 138725 333653

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

SECTION I (1-3 must be completed)	
1412000006164	
1. Name of limited liability Company as it appears on the records of the Florida Department of State: USP UTI UCF, USP	
2. Jurisdiction of its organization: Delaware	
3. Date authorized to do business in Florida: 8 27 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: RIMOVI MER WILLIAM R. HUSEMAN	
and Replace mor with Nikesh A. Patel	
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 organized.  Signature of the authorized representative	
Typed or printed name of signee	

Filing Fee: \$25.00

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