

M15000004921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Oulgan JUL 7 2015



CORPORATION SERVICE COMPANY

2711 Centerville Road • Wilmington, DE 19808-1645

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 695738 4302216

AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : July 4, 2015

ORDER TIME : 8:37 AM

ORDER NO. : 695738-005

CUSTOMER NO: 4302216

FOREIGN FILINGS

NAME: BRE IMAGINATION HOTEL OWNER
LLC

CORPORATE
LIMITED PARTNERSHIP
XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRE Imagination Hotel Owner LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Rubenstein

Name of Person

Luxury Resorts and Hotels

Firm/Company

501 East Camino Real Boca Raton

Address

Florida 33432

City/State and Zip Code

RRubenstein@luxuryresorts.com

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

For further information concerning this matter, please call:

Robert Rubenstein

561

447-3269

Name of Person

at ()

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 ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (2/14)

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST: The name of the limited liability company is: BRE Imagination Hotel Owner LLC

SECOND: The Florida Document number of the limited liability company is: M15000004921

THIRD: Document to be corrected is:
Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The Street Address of the principal office was incorrectly stated.

The correct address is: c/o The Blackstone Group, 345 Park Avenue, New York,
NY 10043

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR

- ☐ The electronic transmission of the record was defective.


Signature of Authorized Representative

7/2/2015

Date

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FLORIDA