M15000000 3924

(Red	questor's Name)						
(Add	Iress)						
(Add	lress)						
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates	s of Status					
Special Instructions to Filing Officer:							

Office Use Only



900339008139

01/10/20--01023--012 **25.00

S TALLENT FEB 1 0 2020



RIN 14



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Carissa Koetitz carissa.koetitz@cscglobal.com

Date: January 8, 2020

Order#: 126531-015

Re: REAL HOSPITALITY GROUP, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

<u>XX</u> File in your office on a routine basis.

XX___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Carissa Koetitz c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX ___ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.	Na	me of the limited liability company: REAL HOSPITA	LITY GR	OUP, LLC		_		
2 (:	a)	12800 Hospitality Way	(b)	12800 Hospitali	ity Way			
(u)		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		Ocean City MD 21842	_	Ocean City	M) 2	1842	
		11/05/2015		M15000008924				
3.		Date of filing/registration in Florida	4.	Docume	ent number			
5. ((e	REGISTERED AGENTS INC						
J. (a)	u	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State:				
		7901 4TH STREET NORTH						
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)					
		SUITE 300						
		ST.PETERSBURG , FL	33702		19	70	ა ე	
(b)	b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress;	· · · · · · · · · · · · · · · · · · ·	ZUZU JAN TU		
		1201 Hays Street			•	A		
		NEW Registered Office Address:			: :- <u>:-</u> :n	AM (U: U I		
		Tallahassee, FL	32301					
the dager	cha it v /we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis ibility co f the limi	tered office and the mpany, it is hereby ted liability compa	e business office confirmed that t	of the	e registered nange(s)	
<u>/s/</u>	Da	una English ture of a member or authorized representative of a member	Dan	a English, Authori	zed Person or typed name of sig	700		
I he prov the to m noti	erel visi obl iere fied	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provided ely reflect a change in the registered office address, I have a change of this change.	performa d for in C iereby co	in this capacity. I ince of my duties, a hapter 605, F.S. C nfirm that the limit	further agree to and I am familiar Or, if this docume ted liability comp	comp with ent is pany	oly with the and accept being filed has been	
Sigr	iatu	re of Registered Agent Corporation Service Company	BY: Gi	ace E. Kirby, Ass	st. Vice Preside	nŧ		