Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000038209 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : UNITED AGENT GROUP INC.

Account Number : I20160000086

Phone : (561)508-5033

Fax Number

: (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email	Address:			

## LLC REGISTERED AGENT CHANGE LTIC HOTEL LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

## H20000038209

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is:	LTIC Hotel LLC
2. (a) Principal office address of the limited liability con	ompany: 111 Jim Moran Blvd.
(Note: MUST BE STREET ADDRESS)	Deerfield Beach FL 33442
(b) Mailing address of limited liability company:	111 Jim Moran Blvd.
(Note: MAY BE POST OFFICE BOX)	Deerfield Beach FL 33442
12/15/2015	M15000010027
3. Date of filing/registration in Florida	4. Document number
5.(a) Registered Agent and Registered Office s	shown on the records of the Florida Dept. of State:
Registered Agent:	C T CORPORATION SYSTEM 😥 🔀
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD
	PLANTATION FL 33324
(b) Enter name of NEW Registered Agent and/or	NEW Registered Office address:
NEW Registered Agents	United Agent Group Inc.
NEW Registered Office Address:	801 US Highway I
(MUST BE FLORIDA STREET ADDRES	\$S)
	North Palm Beach FI, 33408
or changes are made, the Florida street address of the residentical. Or, in the case of a Florida limited liability co an affirmative vote of the members of the limited liability the operating agreement of the limited liability company (Signature of a member or authorized representative of a member of a m	nber)
of all statutes relative to the proper and complete performy position as registered agent as provided for in Chapt in the registered office address, I hereby confirm that the Joseph Panholzer	d agree to act in this capacity. I further agree to comply with the provision irmance of my duties, and I am familiar with and accept the obligations of one 605, F.S. Or, if this document is being filed to merely reflect a change the limited liability company has been notified in writing of this change.  Fr. Special Secretary
(a)grature of Kegistered Agent)	P.O. Box 6327, Tallahassee, FL 32314
INHS18(10/99)	1 to, but von , randimote, i L 32017