Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H17000024433 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SOLOMON & FURSHMAN, IJ.P

Account Number : I20050000182 Phone : (305)861-8034 Fax Number : (305)861-8012

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

Email Address: Victor @ SFLLP. Com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

HYDE RESORT TRS LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$30.00

Electronic Filing Menu

Corporate Filing Menu

Help

FEB 15 2017

COVER LETTER

Division of Corporations	•		
_{suвјест:} Hyde Resort TRS	LLC		
Name of Foreign	n Limited Liabi	lity Compa	any
Dear Sir or Madam:			
The enclosed application, certificate and fee(s) a	are submitted fo	or filing.	
Please return all correspondence concerning this	s matter to the i	ollowing:	
Bert Kirkland			
Name of Person		-	
Sotherly Hotels			
Firm/Company		•	
410 W. Francis St.			
Address		•	
Williamsburg, VA 23185			
City/State and Zip Code	•	<u>-</u>	
bertkirkland@sotherlyhotels	s.com		
E-mail address: (to be used for future annual		ion)	
For further information concerning this matter, p		000	TO 40
Bert Kirkland	_{at (} 757) <u>229-</u>	5648
Name of Person	Area Code	& Daytime	e Telephone Number
STREET/COURIER ADDRESS:			NG ADDRESS:
Registration Section		_	ation Section
Division of Corporations Clifton Building		P.O. Bo	n of Corporations
2661 Executive Center Circle	•		ssee, Florida 32314
Tallahassee, Florida 32301			,
Enclosed is a check for the following amount: \$25 Filing Fee \$30 Filing Fee &	: ☐ \$55 Filir	ur Foo &	☐ \$60 Filing Fee,
Certificate of Status	Certified	-	Certificate of Status Certified Copy

CR2E055 (9/15)

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

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	s on the records of the Florida Dep	artment of
State: Hyde Resort TRS LLC		
Enter new principal office address, if applicable:		(11)
(<u>Principal office address</u> MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	•	2: BO : STATE FI ORIDA:
2. The Florida document number of this limited lia	ability company is: M1600000	9108
3. Jurisdiction of its organization: Delaware 4. Date authorized to do business in Florida: No SECTION II (5-9 complete only the applicable 5. New name of the limited liability company:	changes)	vices TRS LLC
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.C. 6. If amending the registered agent and/or registered registered agent and/or the new registered office a	d for the purpose of transacting bus inaging members adopting the alter C." or "LLC.")	iness in Florida and attach a nate name. The alternate name
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida S	Greet Address
		_, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regis document is being filed to merely reflect a change liability company has been notified in writing of the	ent and agree to act in this capacity r and complete performance of my stered agent as provided for in Cha e in the registered office address, I	duties, and I am familiar with pter 605, F.S. Or, if this

tle/ Capacity	Name	Address	
		(FAMI25)3	Type of Action
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			Remove
		•	Add
			Remove
			Add
aforementioned amer	law of which this entity is orga	y the official having custody of record	ds in the

<u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "HYDE RESORT TRS LLC",
CHANGING ITS NAME FROM "HYDE RESORT TRS LLC" TO "SOHO OCEAN
RESORT SERVICES TRS LLC", FILED IN THIS OFFICE ON THE TWENTYFOURTH DAY OF JANUARY, A.D. 2017, AT 4:30 O'CLOCK P.M.



Authentication: 202041411

Date: 02-15-17

State of Delaware
Secretary of State
Division of Corporations
Delivered 04:30 PM 01/24/2017
FILED 04:30 PM 01/24/2017
SR 20170418359 - File Number 6167482

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

	the Limited Liability Company is hereby read: "SOHO Ocean Resort Services TRS
	•
IN WITNESS Y	VHEREOF, the undersigned have executed this Certificate
	day of January , A.D. 2017
	-
	By: Che
	Authorized Person(s)
	Name: Victor Records