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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

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CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

Phone: 850-558-1500

ACCOUNT NO.	: 12000000195						
REFERENCE	: 164006 8056587						
AUTHORIZATION	· Smull of						
COST LIMIT	: \$ (25 00						
ORDER DATE : April 16, 2018							
ORDER TIME : 9:01 AM							
ORDER NO. : 164006-005							
CUSTOMER NO: 8056587							
FOREIGN FILINGS							
NAME: BSREP III FORT LAUDERDALE TRS LLC							
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY							
XXXX AMENDMENT							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations BSREP III Fort Lauderdale TRS 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: C. Simms Name of Person c/o Thayer Lodging Group LLC Firm/Company 1997 Annapolis Exchange Pkwy, Suite 550 Address Annapolis, MD 21401 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person Daytime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$25 Filing Fee \$55 Filing Fee & \$30 Filing Fee & \$60 Filing Fee, Certificate of Status Certificate of Status & Certified Copy

Certified Copy

CR2E062 (9/15)

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.

		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)			
		Registered Agen	_			
		Desistand Assa	'e Signature			
New R I herel provis obliga reflect	ing the d	esignation). d Agent's Signature, if changing Registered Agent: the appointment as registered agent and agree to act ll statutes relative to the proper and complete perform y position as registered agent as provided for in Ch e in the registered office address, I hereby confirm th				
Signat	ure of ne	Signature of Authorized Representative w registered agent, if applicable :(NOTE: if correcti	Date	gent must sign		
		/s/ George D. Dabney, Vice Pre				
		ectronic transmission of the record was defective.				
	<u>OR</u>			RATIONS		
				RY OF S		
	Was d	efectively signed. The manner in which the documenows:	it was defectively signed and the appropriate	correction are		
	<u>OR</u>					
	c/o ~	Thayer, 1997 Annapolis Exchange Pk	wy, Suite 550, Annapolis, MD 2	1401		
	BSF	REP III Fort Lauderdale Mezz Le	ssee LLC			
	Man	lanaging Shareholder's name and address shall be corrected to read as follows:				
X		ins an incorrect statement. The incorrect statement, t ent are as follows:	ne reason the statement is incorrect, and the	corrected		
	(CHECK THE APPROPRIATE BOX AND COM	PLETE THE APPLICABLE STATEMEN	<u>VT</u>		
<u>THIR</u>	<u>D</u> :	Document to be corrected is:	iability Company for Authorization to conduct business in the state	of Florida		
SECO	ND:	The Florida Document number of the limited liabil	ity company is: M18000003299			
				····		
FIRS	<u>r</u> : The na	ame of the limited liability company is: BSREP	III Fort Lauderdale TRS LL	. <u>C</u>		