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Account Name : TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS, P.A.

Account Number : 076424003301 Phone : (813)223-7474 Fax Number : (813)227-0435

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

Email Address: tgood@trenam.com; alex@newhotelcollection.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TDZ ARCADIA, LLC

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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 Department	rof
State: TDZ Arcadia, LLC			
Enter new principal office address, if applicable:	146 2nd St. N., Su	ite 301	
(Principal office address MUST BE A STREET ADDRESS)	St. Petersburg, FL	33701	
Enter new mailing address, if applicable:	146 2nd St. N., Su	ite 301	
(Mailing address MAY BE A POST OFFICE BOX)	St. Petersburg, FL	33701	:
2. The Florida document number of this limited lia		M22000012792	
Jurisdiction of its organization: Delaware			
4. Date authorized to do business in Florida: Aug	ust 15, 2022		
SECTION II (5-9 complete only the applicable			~ ··
5. New name of the limited liability company:(mus	t contain "Limited	Liability Company, ""	L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.C	naging members at	transacting business in lopting the alternate na	Florida and attach a me. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office as	ddress here:	n our records, <u>enter the</u>	name of the new
Name of New Registered Agent: TK Registered A	igent, Inc.		
New Registered Office Address: 101 E. Kennedy	Boulevard, Suite 21		
		Enter Florida Street Ad	
i ar	npa ————————————————————————————————————	, Flori	da 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 regist document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act and complete perf ered agent as prov in the registered of is change.	in this capacity. I furth ormance of my duties, a ided for in Chapter 603	er agree to comply with and I am familiar with 5, F.S. Or, if this confirm that the limited

itle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
// GR	TDZ Management, LLC	14100 Miranda Lane, Suite 20	
		Largo, FL 33774	= Rem
IGR	TDZ Partners, LLC	146 2nd St. N., Suite 301	\alpha dd
		St. Petersburg, FL 33701	□Rem
			☐ Rem
			□Remo
			DAdd
aforemention	nder the law of which this entity is	ed by the official having custody of records in the	□Remo

Filing Fee: \$25.00