M23000000989

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
(0.1), 0.10.0 1,						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
J. Dennis						
NEV2 202						

Office Use Only



400434833754

SECRETARY OF STATE

2021/NOV 21 AH 10: 56

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: MARRIOTT HO	OTEL SE	RVICES.	, LLC		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u> </u>	-, <u></u>	Mailing address	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	7750 WISCONSIN AVENUE		7750	ENUE		
	Bethesda, MD 20814		Bethesda, MD 20814			
	01/25/2023		M2300000989			
3.	Date of filing/registration in Florida	— 4.		Document n	umber	
5 (n)						
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florid	la Dept. of	State:		
	C T CORPORATION SYSTEM					
	Registered Office Address	TADDRES	<u></u>			
	1200 SOUTH PINE ISLAND ROAD				SE::11	
	PLANTATION . F	33324			PILED 2024 NOV 21 PM 3: 45 SECRETARY OF STATE CHILANASSI PRICIPINA	
					ELE ELE	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				유 후 다	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				OF ST	
	Corporation Service Company				- 5 5 5 THE STATE OF THE STATE	
	NEW Registered Office Address:					
	1201 Hays Street					
	Tallahassee	32301				
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited last ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the ne register liability of the lin ne limited	e State of red office ompany, nited liab liability	f Florida, it is he e and the busines it is hereby conf bility company o company.	is office of the registered firmed that the change(s) ir as otherwise provided in	
	/s/ Andrew P.C. Wright	<u> </u>	drew P.C	C. Wright, Author		
_	ature of a member or authorized representative of a member				ed name of signee	
provisi the obl to mer	hy accept the appointment as registered agent and agions of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, if in writing of this change.	te perform led for in I hereby c	iance of s Chapter confirm to	my auties, and t 605, F.S. Or, if hat the limited li	лт катинаг жин апа ассепс	
Signatu	Inc. L. KIND GRACE E. KIRB GRACE E. KIRB	BY, ASST	: VICE I	PRESIDENT		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00