

8/8/2017

Division of Corporations

M9800000515

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : INCORPORATING SERVICES FL  
Account Number : I20050000052  
Phone : (850)656-7956  
Fax Number : (850)656-7953

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**LLC REGISTERED AGENT CHANGE  
CSM LODGING, L.L.C.**

|                       |         |
|-----------------------|---------|
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**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. Name of the limited liability company: CSM Lodging, L.L.C.

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)

500 Washington Ave. S., Suite 3000

Minneapolis, MN 55415

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

3. 05/22/1998 Date of filing/registration in Florida 4. M98000000515 Document number

5. (a) NRAI Services, Inc.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1200 South Pine Island Road

Plantation, FL 33324

(b) Incorporating Services, Ltd.

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1540 Glenway Drive

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

**Bradley Kittleson**  
**Manager**

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Lucy Rose, Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

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