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### MILLER, SHINE & BRYAN, P.L.

#### ATTORNEYS AT LAW

JOE C. MILLER II JUDITH G. SHINE LINDA LOGAN BRYAN P.O. Box 3376 97 Orange Street St. Augustine, Florida 32085-3376 Telephone: (304) 824-0484

Facsimile: (904) 824-3857

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August 30, 2017

Florida Department of State Amendment Section P.O. Box 6327 Tallahassec, FL 32314

> Re: Kasam Hospitality, Inc./Document No.: P01000024310 Statement of Change of Registered Office/Agent

To Whom It May Concern:

Enclosed please find our check number 1193 in the amount of \$35.00 for the filing fee for the above-referenced document and its required cover letter. Please call the number above should you have any questions.

Sincerely,

Linda Logan Bryan

LLB/mbp Enclosures

#### **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Kasam Hospitality, Inc.

Name of Corporation

DOCUMENT NUMBER: P01000024310

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kanti Patel, President

Name of Contact Person

Kasam Hospitality, Inc.

Firm/Company

32 Avenida Menendez

Address

St. Augustine, FL 32084

City/State and Zip Code

kanti.patel@jalaramhotels.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda Logan Bryan, Esq. at 904 824-0484

Name of Contact Person Area Code & Davime Telephone 3

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
	e corporation: Kasam Hospitality, Inc.
	ffice address: 32 Avenida Menendez, St. Augustine, FL 32084
-3. The mailing add	dress (if different):
4. Date of incorpo	ration/qualification: March 8, 2001 Document number: P01000024310
5. The name and s	treet address of the current registered agent and registered office on file with the nent of State: (If resigned, enter resigned)
<u>N</u>	Mahendra Patel
4	580 Collins Road
<u>J</u>	acksonville, FL 32244
6. The name and st (if changed):	acksonville, FL 32244  treet address of the new registered agent (if changed) and /or registered office
K	Canti Patel
3	2 Avenida Menendez
S	P.O. Box NOT acceptable t. Augsutine, FL 32084
The street address as changed will be	of its registered office and the street address of the business office of its registered agent, identical.
Such change was a authorized by the b	outhorized by resolution duly adopted by its board of directors or by an officer so coard, or the corporation has been notified in writing of the change.
( )	Kanti Patel, President Printed or typed name and title
	appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete duties, and I am familiar with and accept the obligation of my position as registered ocument is being filed merely to reflect a change in the registered office address, I the corporation has been notified in writing of this change.
	g of Registered Agent Date
Hanti F	'ale/