

PO1000040109

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

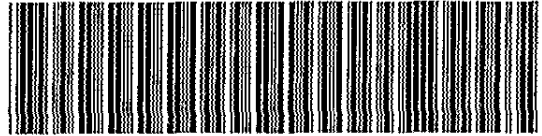
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Robert Dosek
gave author to print
name
ac 1-16-03

Office Use Only



100009806891

01/13/03--01043--016 **35.00

FILED

03 JAN 13 PM 12:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ac 1-16

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CLA MOTELS IV, INC.
(Name of corporation)

DOCUMENT NUMBER: P01000040109

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:

CHRIS LIANO
(Name of person)

CLA MOTELS IV, INC.
(Name of firm/company)

3141 UNION BLVD.
(Address)

EAST ISLIP, N.Y. 11730
(City/state and zip code)

For further information concerning this matter, please call:

CHRIS LIANO at (631) 581-9100
(Name of person) (Area code & daytime telephone number)

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
409 E. Gaines Street
Tallahassee, FL 32399

FILED
03 JAN 13 PM 2:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CLA MOTELS IV, INC.
2. The principal office address: 1500 S. OCEAN DRIVE / 9E
HOLLYWOOD, FL 33019
3. The mailing address (if different): 3141 UNION BLVD.
EAST FLIP, N.Y. 11730
4. Date of incorporation/qualification: 4/20/01 Document number: P01000040109
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

STEVEN A. FEIN, ESQ.
900 SOUTH STATE RD. 7
PLANTATION, FL 33317

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ROBERT DOSCH
2401 SOUTH OCEAN DR. / UNIT #2105
(P.O. Box or personal mailbox NOT acceptable)
HOLLYWOOD, FLA 33019

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer, chairman or vice chairman of the board)

CHRIS LING, PRES.
(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

1/7/03
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314